

COMMUNITY PROFILE

Note: The AST EM StAMPS candidate is to place themselves in the role of the Senior AST EM Doctor in the Emergency Department at all times.

All doctors work primarily in StAMPSville but are occasionally rostered to one of the smaller towns in the district.

Demographics and Geography

- Coastal regional town supporting outlying smaller health services
- Population: 16000 in town, 9000 in surrounding region. Large number of FIFO workers as it is a major port for coal mine export and holiday makers
- Serves a very large rural area including coastal communities, remote mining sites, major National Parks, several large offshore islands and several small towns (pop. 500 – 2000) which are predominantly indigenous communities
- Principle regional centre for government services, business centre, service industries, transport and educational hubs
- Other major employers include agriculture, mining, fishing, forestry operations and tourism
- 35% Aboriginal and/or Torres Strait Islander – majority live on offshore islands or remote communities
- Increasing number of overseas migrant populations
- Popular holiday destination for biking, hiking, camping and diving
- The local resident overall population is gradually ageing
- The population overall has higher levels of chronic illness, poorer nutrition, higher rates of smoking, alcohol and recreational drug use, lower levels of formal education and employment, and other negative social determinants of health
- The climate is generally regarded as hot
- There are frequent tropical storms

Nearest Hospital

- Northern General 180 km away - Regional Hospital CSCF Level 4 – No cardiac catheter lab or clot retrieval

- Southern University 350 km away – Tertiary Hospital CSCF Level 6
- Onsite helipad available
- Local airport is 3 kms away from the hospital

StAMPSville Regional Hospital

- 70-110 inpatient beds with 24/7 Rural Generalist and/or Sub specialist Staffing [CSCF](#) Level 3
- Emergency Medicine
- General Surgery
- Obstetrics and Gynaecology
- Adult Internal Medicine
- Palliative Care
- Rehabilitation Medicine
- Paediatric Medicine (Low complexity neonatal care > 36 weeks gestation)
- Psychiatry (incl Crisis Assessment Team). No dedicated security unit for involuntary patients
- HDU - Maximum 24 hours for ventilated patients
- 12 bed “Hospital-in-the-home” service (joint ED/AIS responsibility)

Medical Imaging in StAMPSville

- Plain X-ray
- Ultrasound
- CT available every day on-site 0800-1800 with on time reporting facilities
- On-call overnight but no immediate reporting available, can discuss CT with Radiologist remotely
- “Point of care” ultrasound available in ED. ED senior doctor credentialled for FAST scan only
- MRI and other specialised imaging only available at a tertiary Hospital

Pathology Services in StAMPSville

- Haematology, biochemistry, limited microbiology, 4Plex 0800-1800
- Blood bank services available 0800-1800, on call 1800-0800
- Limited stock - Four units O neg, 1-unit FFP, 4 units of platelets, Cryoprecipitate
- Point of care ABG/VBG, Chem 8, Troponin, Urine drug screen, Urinalysis Respiratory Rapid Antigen Influenza/Covid/RSV available in ED for outside lab hours

Regular visiting Medical Officer Subspecialist Services to StAMPSville

- Fracture Clinic
- Orthopaedics (incl day procedures)
- Urology (incl day procedures)
- ENT (incl day procedures)
- Ophthalmology (incl day procedures)
- Dental (incl day procedures)
- Oncology (incl outpatient chemotherapy service)
- Endocrinology
- Cardiology
- Nephrology
- Geriatrics

Emergency Transport Services in Region

- 24/7 Paramedic road ambulance service based in EM StAMPSville
- 24/7 Paramedic with Volunteer support in larger towns
- 24/7 Volunteer ambulance officers in smaller towns
- Nurse ambulance response in very small communities
- 24/7 road retrieval service from EM StAMPSville Regional Hospital. Availability dependent on clinical urgency, road conditions and staff availability
- Road conditions and bridge infrastructure currently in poor condition due to significant flood damage to major and minor transport routes. Advice from Police required before undertaking road travel to small communities.
- Fire service and SES have significant capability to support ambulance services requiring difficult access, safety of personnel and specialty ground/water transport
- 24/7 helicopter retrieval service based Northern General Hospital. Availability dependent on weather

conditions, staffing availability and safe working practices. Limited to 200km radius without re-fueling (re-fueling available in EM StAMPSville). Approx. 1-hour flying time to EM StAMPSville. Allow minimum of 3 hours from time of activation

- Airstrip generally only suitable for fixed wing aircraft daylight operation

StAMPSville Emergency Department

- 28,000 attendances per year (approx. 75 patients per day, maximum 110)
- Admission/transfer rate approximately 25%
- Significant proportion of Triage Category 4 and 5 attendances due to shortage of after-hours GP services
- Paediatric presentations approx. 22%
- Mental Health Presentations approx. 15%

ED Medical Staffing 0700 – 2400

- Senior Medical Officer/Consultant (ACEM Diploma or FACRRM AST – the candidate)
- Registrar (Rural Generalist AST pathway) x 6
- PGY 2 or 3 (GP or Rural Generalist Core Training) x 4
- Intern x 2
- Medical student x 2
- Recruitment of doctors has always been a challenge

ED Medical Staffing 2400 – 0700

- Senior Medical Officer (on call) – the candidate
- Registrar
- PGY 2 or 3 (Ward call + ED)
- Intern (Ward call + ED)

ED Nursing Staff

- Nonclinical Nurse Unit Manager
- Triage Nurse 0700 - 2400
- Senior nurse 24/7
- Registered nurses x 6 “on the floor” 0700 - 2400, x 3 on night shift – at least 1 ALS Competent RN and one qualified Midwife per shift
- At least half on any shift are agency nurses
- Psychiatric/Mental health support nurse x 1 day shift
- Enrolled nurses x 2-day shift
- Student nurses x 2-day shift
- Nurse educator x 1-day shift

ED Physical Resources

- Resuscitation bays x 2 with full monitoring
- Close observation bay x 1 with full monitoring
- General acute bays x 6. Three with cardiac monitoring
- Negative pressure isolation room x 1
- Obstetrics/Gynaecology/Sexual assault private room
- Paediatric bay x 2
- Secure Mental Health room x 1
- Consultation rooms x 3
- Ambulatory Care chairs x 6 in dedicated bay
- Plaster/Procedure room x 1
- Relatives/Quiet interview room x 1

ED Ancillary Staff

- Receptionist
- Ward clerk
- Dedicated cleaning staff
- Dedicated attendant/wardsmen x1 24/7
- Security staff x 2 24/7, Police available if require physical restraint
- Allied Health staff, Aboriginal Liaison Officer, Multicultural Liaison Officer, Social worker all on call to ED during normal working hours 0800 – 1700. Very limited out-of-hours availability with exception of Pharmacist on call
- Sexual assault support worker, Domestic Violence support worker, Child Protection service provided 24/7 by external agencies

Other ED resources

- ECG
- Biers Block Machine
- ICC/IDC/Suprapubic/Arterial Line kits including Seldinger Kits
- Point of Care Ultrasound
- Handheld Doppler
- Mobile/bed side X-rays utilising Medical Imaging staff (Limited to extremities, chest, pelvis)
- Point of care ABG/VBG, Chem 8, Troponin, Urine drug screen, Urinalysis
- Dedicated Videoconferencing system for ED education and remote clinical consultations
- Resuscitaire

Other services provided by ED senior medical staff

- “Code Blue” and “MET call” response to all areas on hospital campus. ED senior is the lead
- First call for obstetric emergencies afterhours
- Usually visiting GP at least x1 per week
- Hospital-in-the-home – medical support for HITH nurses
- Clinical advice consultation to GPs and Remote Areas nurses in outlying towns and clinics
- Road Retrieval Service to outlying towns and clinics in conjunction with ambulance service
- Pre-hospital emergency care in conjunction with ambulance service
- Education service to ED staff, doctors-in-training, students and wider GP community
- Lead clinical unit for Mass Casualty preparedness and response

Support Services

- Anaesthetics (24/7 Rural Generalist Anaesthesia Cover)
- Operating theatres (Available 24/7 on call but defer to normal working hours if possible).
- Non-complex surgery
- Recently appointed FRACS General Surgeon
- 6 bed HDU/ICU (joint ED/Anaesthetic responsibility. Most permanent nursing staff have higher qualifications in main area of practice.
- High reliance on agency nursing staff
- Full range of Allied Health services but high reliance on locum services and only 0800-1700 (except pharmacy - available on call 24/7)
- Aboriginal Liaison Officer
- Multi-cultural Liaison Officer

Northern General Hospital CSCF Level 4

- 220 bed General Hospital
- Located 180 km north of StAMPSville
- 2 hours by road or 1 hour by air
- All core specialties on site and some sub-specialties – including non-interventional Cardiology, Respiratory, Gastroenterology, Small ICU – Anaesthetist/Physician run
- Usual referral hospital for StAMPSville
- Has 24/7 helicopter aero-medical retrieval service
- Frequently access-blocked

Southern University Hospital CSCF Level 6

- 700 bed Tertiary Hospital
- Located 360km south of StAMPSville
- 4 hours by road or 2 hours by air
- Has 24/7 fixed wing aero-medical retrieval service
- Has most subspecialties on site excluding transplant services, spinal injuries
- Always bed-blocked

Other Health services outside StAMPSville

Small towns and communities

Towns with >1000 population

- GP/Rural Generalist VMOs in town with 24/7 on-call roster
- Low acuity hospital (6-10 beds) + Aged Care Facility. No obstetric services
- Specialist outreach services from StAMPSville
- 24/7 nursing staff on duty – majority permanent staff
- Paramedic ambulance service supplemented by trained volunteers

Towns with < 1000 population

- Nurse-run clinic with 2-3 “holding beds” + Aged Care Facility
- Usually nurse on duty 24/7 – on call 1600-0800 – Permanent staff
- Usually solo or visiting GP. No formal medical on call
- Volunteer ambulance
- Small basically equipped ED with point of care pathology, limited X-rays (limbs and chest) and videoconferencing link to StAMPSville
- Helipad generally only suitable for daylight ops

Island communities with populations generally 200 – 300

- Solo “Remote Area” nurse run clinic and no formal ED or holding beds. May have small Aged Care Facility.
- Permanent Nursing Staff
- Nurses provide ambulance service
- Helipad or airstrip suitable for most weather conditions