



## Spinal Cord Impairment Action Plan

2014 - 2019

## Overview

- Brief summary SCI Action Plan
- Objective one / two focus
- Current status
- Next steps



### SCI Action Plan



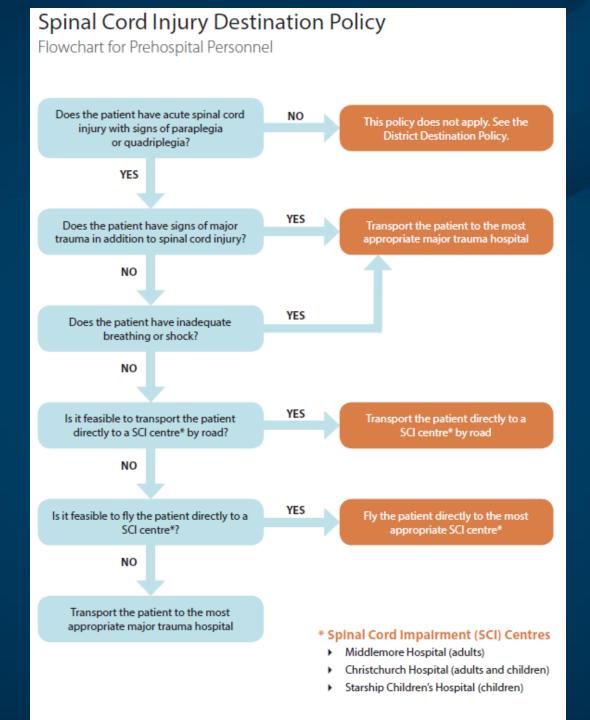
- Collaborative project established by the Ministry of Health and ACC to develop an SCI strategy and implementation plan
- National SCI Action Plan released July 2014
  - Eight objectives covering pre-hospital living in the community
- Governance committee meets twice a year
  - Membership is broad (clinical and non-clinical) and includes people with SCI
  - Chaired by Ian Civil
- Sponsors are the Ministry of Health and ACC

#### Acute care

- Covered under objective 1 (adults) and objective 2 (children & adolescents)
- Improve acute clinical outcomes for adults and children requiring acute SCI Care
- We now have a national model:
  - Two supra-regional acute <u>adult</u> services (Middlemore Hospital and Christchurch Hospital)
  - One national child and adolescent service (Starship)

# Acute care – destination policy

- Destination policy and procedure
  - Developed from a draft in the SCI Action Plan
  - Wide collaboration in development of the policy and procedure
  - Fits with DHB Annual Planning Guidance
  - Takes other trauma and geography into consideration
  - Simple flow chart is supported by a comprehensive appendix
  - Endorsed by the SCI Governance Committee
  - Approved by the Ministry of Health, ACC, St John Ambulance,
    Wellington Free Ambulance,
  - Ministerial release 24 July 2015
  - Destination Policy effective 1 August 2015



## Relevance to nurses

- Some patients with SCI will not go directly to a supraregional SCI centre (or Starship). For example:
  - Other signs of major trauma (managed under the major trauma destination policy)
  - Inadequate breathing or shock
  - Paramedic hasn't recognised acute SCI
  - It isn't feasible to fly the patient direct to a SCI centre
- These patients should be secondarily referred to a SCI centre when clinically appropriate
  - Clinical advice is available from these centres
  - Patients should be transferred when clinically able (which may be direct from an ED)

