

[REDACTED] and Tocumwal – assessment of need

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Tocumwal

Tocumwal has a CFR service. In 2022/23, there were **214 Priority 1 cases** (emergency response with lights and siren), and **210 Priority 2 cases** (urgent response without the use of lights and siren) in Tocumwal. This is an average of 4.1 P1 incidents per week and meets the criteria for a blended station, where volunteers work alongside paramedics to meet demand (Table 1). The guidelines recommend that locations with more than 4 P1 incidents per week have too much demand to be met by a volunteer service. The guidelines also recommend that locations with fewer than 7 P1 incidents per week do not have enough demand for a career station to enable maintenance of paramedic clinical capability. Demand in Tocumwal is projected to grow by 36% by 2036 which would equate to 291 P1 incidents or 5.6 P1 incidents per week.

There were 132 P3 incidents that were transferred from Tocumwal Hospital. Most transfers were to Goulburn Valley Base Hospital (an average of 165 minutes case cycle time) and Albury Base Hospital (an average of 209 minutes case cycle time). Whilst this increases the workload in Tocumwal response area, a station in Tocumwal would only have one module so if this module is responded to a transfer to Albury, it will be out of the area for more than three hours. The advantage of a service with volunteers is that they are not responded out of area and remain available for local incidents.

Volume of caseload is an important factor in maintaining clinician capability in the provision of safe, high quality care. NSW Ambulance credentialing requirements are in place to maintain appropriate levels of paramedic clinical capability. Exposure to adequate case volume is an important requirement in maintaining capability with a high risk scope of practice. Very low demand locations present significant challenges that do not support maintenance of appropriate clinical capability for paramedics with a high risk scope of practice.

Table 1: Guidelines for appropriate station type

	Weekly P1 incidents in catchment	Weekly total incidents in catchment	Closest paramedic station
CFR	<2	<4	
CERT	2-4	4-8	<30 min
VAO	2-4	4-8	>30 min
Blended	4-7	9-15	
Career	>7	>15	

Prioritisation

Service Planning station prioritisation identified five current CFR locations that are now considered to have too much demand for a CFR service. It is recommended that new stations are prioritised for [REDACTED] and that a blended model is prioritised for [REDACTED] and Tocumwal. The highest priorities out of the current CFR stations are [REDACTED].

There are more than 20 other locations throughout regional NSW that represent higher priorities for a career or blended model including [REDACTED].

Recommendation

If the aim is to improve response times for patients in areas where a CFR model is no longer sufficient, and it is not possible to introduce a Blended model, and it is decided that the caseload at Tocumwal is sufficient for paramedics to maintain clinical practice, and AV will continue to respond to incidents in [REDACTED], then a station at Tocumwal can be considered.

However, it should be considered that there are other locations in NSW that represent a higher priority given their current level of service and level of demand.