

Royal Flying Doctor Service (Western Operations)

Influencing Infection Control in WA's
Royal Flying Doctor Service



The Royal Flying Doctor Service in Western Australia respects and acknowledges the Traditional Owners of the country upon which we work, live and fly.

We acknowledge their continuing connection to the land, sea and skies of Western Australia.



What we do | Our bases





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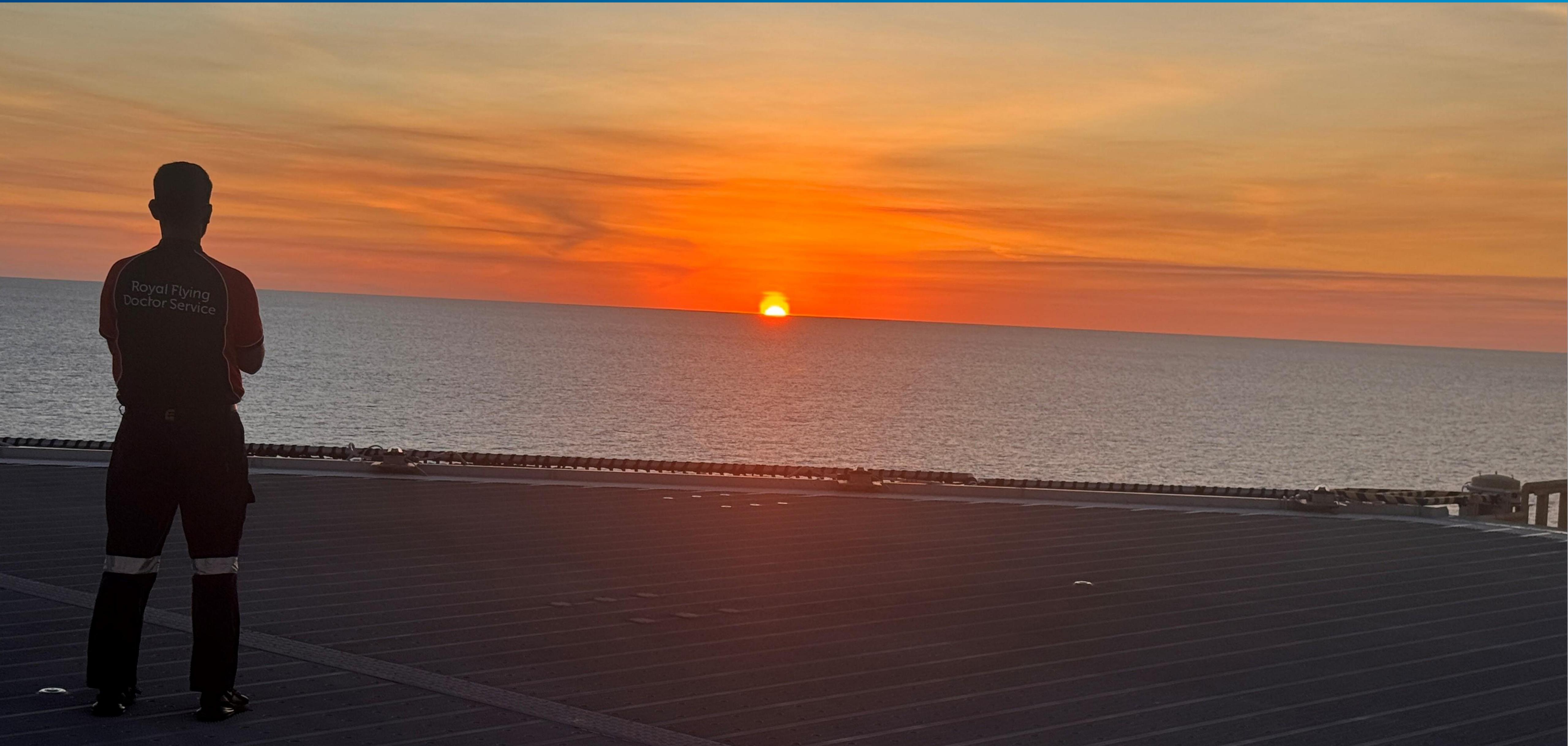


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Challenges and Opportunities- Aeromedical

- Civil Aviation Safety Authority (CASA) regulations
- Aircraft cleaning
- Protecting our pilots
- PPE
- Confined spaces
- High cost and scarcity of resource
- Practicalities of providing clinical care in this unique setting
- Limited literature and research available



Aircraft Cleaning and Decontamination

- Quick turn around
- Sensitive components and materials- cannot be damaged as may affect flight safety
- Spills can be very costly
- Regular contract cleaning of aircraft
- Kit bags and consumables



Protecting our Pilots and Engineers

- Pilots and engineers not clinical
- Pilots assist with many aspects of clinical care
- Engineers and pilots are exposed to bodily fluids and infectious disease
- Often did not receive the same immunisations as clinicians generally have
- Aircraft design means pilots are exposed due to cabin airflow



PPE in Aeromedical

- Pilots flying in PPE
- Windy, hot, cold, raining
- Fire retardancy
- Anti-static
- Non clinicians wearing PPE
- Life vests, flying over water
- Winching and other activities
- Close confines
- Mosquitoes, sun, chemicals, fire



Factors for Transmitting Infections Onboard Aircraft

- Ventilation- onboard aircraft
- Longitudinal airflow- no HEPA
- Forced air over respiratory mucosa
- Proximity of all persons on board small aircraft
- Positioning of infectious patient
- Duration of time on board the aircraft in the close confines
- Aerosol generating procedures in these close confines



Practicalities of Clinical Care on Aircraft

- Aseptic Non-Touch Technique on board
- Hand Hygiene
- Occupational exposures and needlestick injuries
- Waste and sharps management



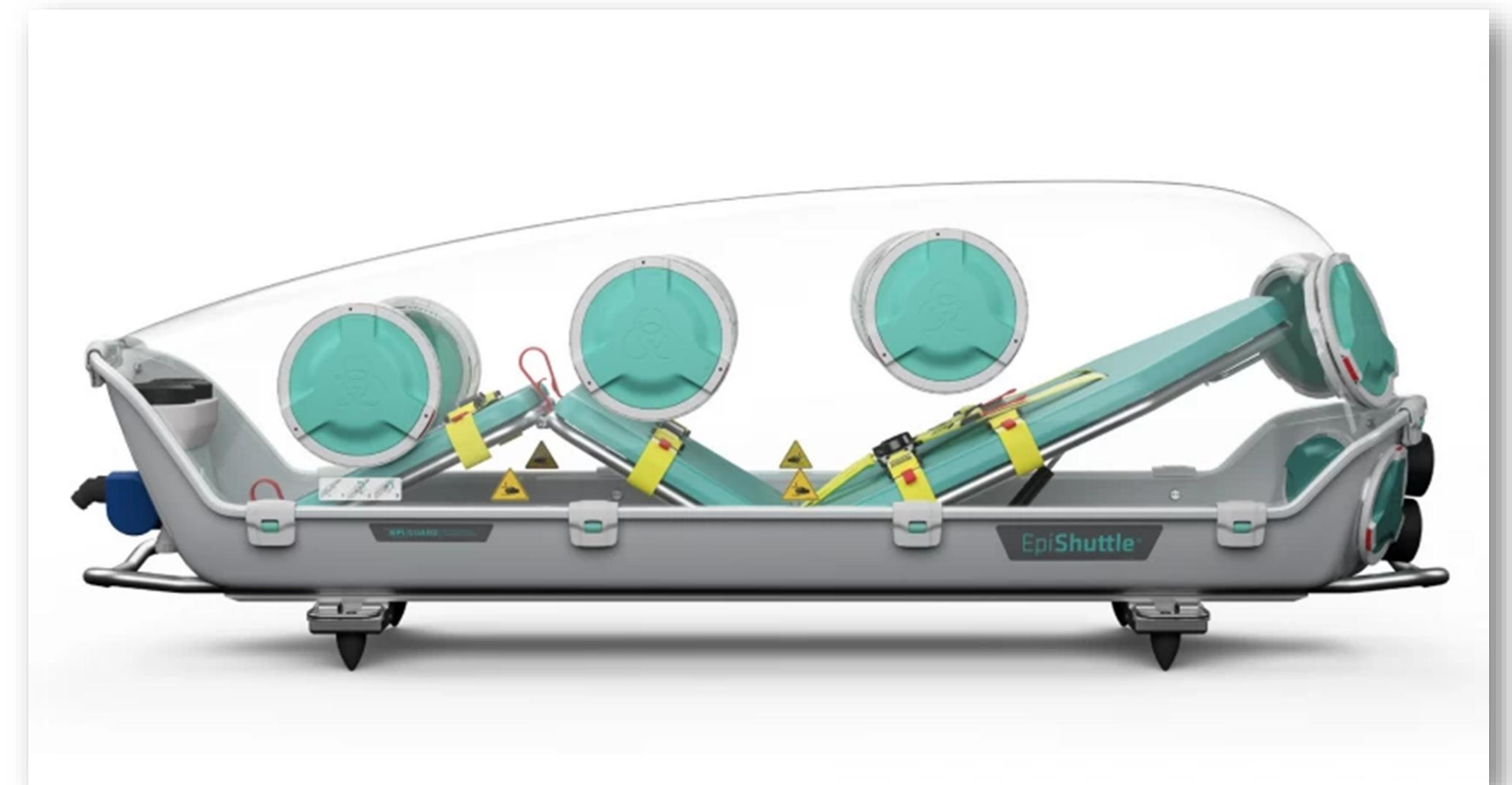
Challenges and Opportunities

- Resource intensive industry
- Cost of flying “single stretcher”
- Harm to environment of single stretcher
- Highly specialised crews (clinical and aviation)
- Pilot hours cannot be exceeded-crews may need to overnight at places other than home base



High Consequence Infectious Diseases

- Planning for High Consequence Infectious Disease transport
- Best way to protect crews
- Consider other Chemical, Biological, Radiological, Nuclear and Explosion (CBRNE) events and how we can respond
- Future pandemic planning
- EUROCAE *ED-317 Guidance Document for Aeromedical Transport of Patients with Highly Infectious Diseases*
- RFDS WA Critical Incident & Emergency Management team and emergency response plans



Networking

- RFDS IPC multi-section collaborative groups
- National Ambulance IPC network
- HCID Retrieval Community of Practice
- Australian Institute of Emergency Services Health Emergency Management Community of Practice
- ACIPC of course



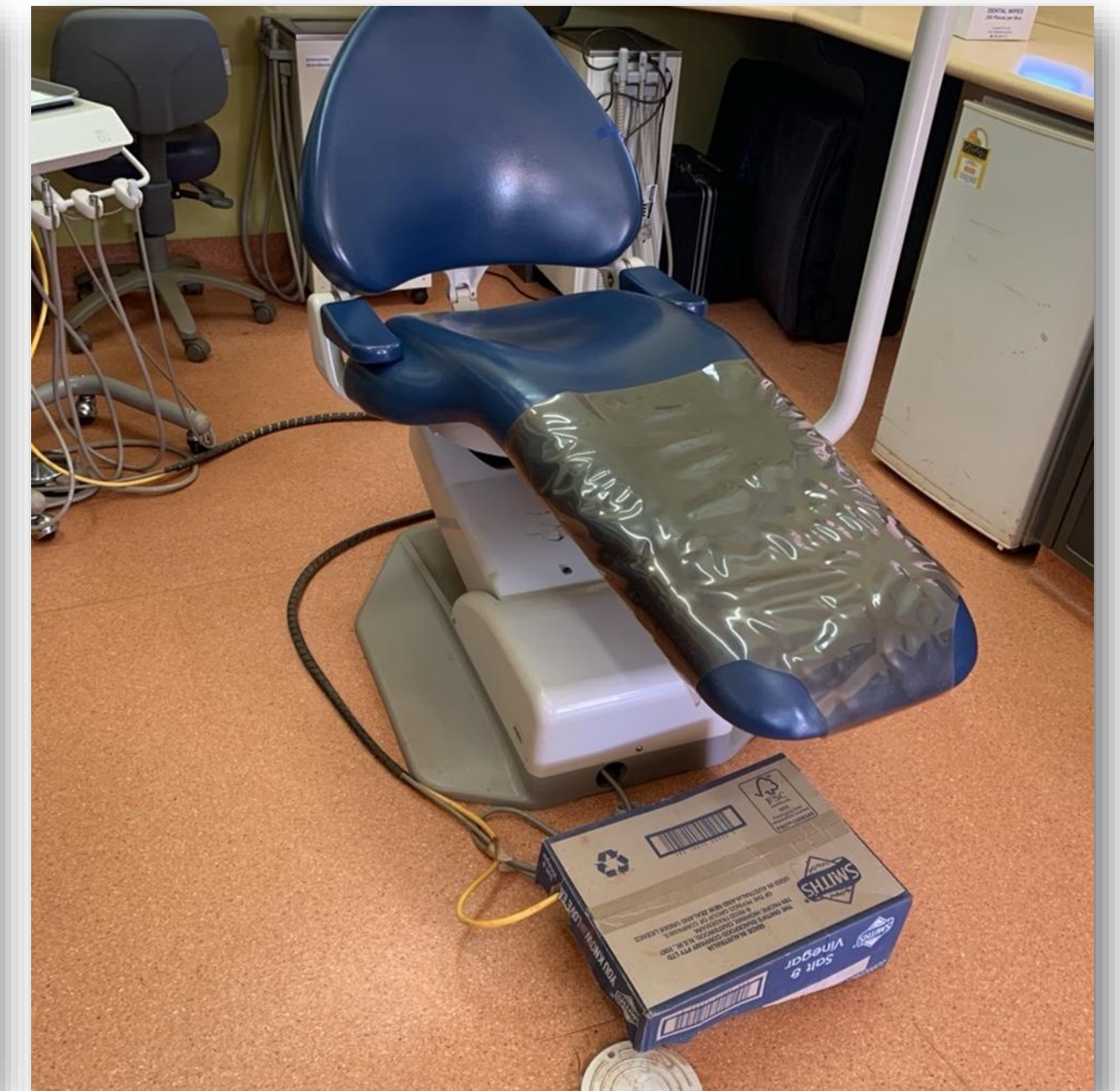
Primary Health Care

- We provide GP services to remote areas
- Vaccination clinics- ultra cold chain
- Women's Health



Dental

- 7 dental clinics
- Mobile dental clinics
- Very remote sites- fly in
- Take all equipment including dental chairs and dental carts/suction etc
- Centralised re-processing of dental instruments



Industrial Health

- Oil and Gas Platforms
- Remote exploration sites
- Mine Sites
- Flotels
- Community Paramedicine

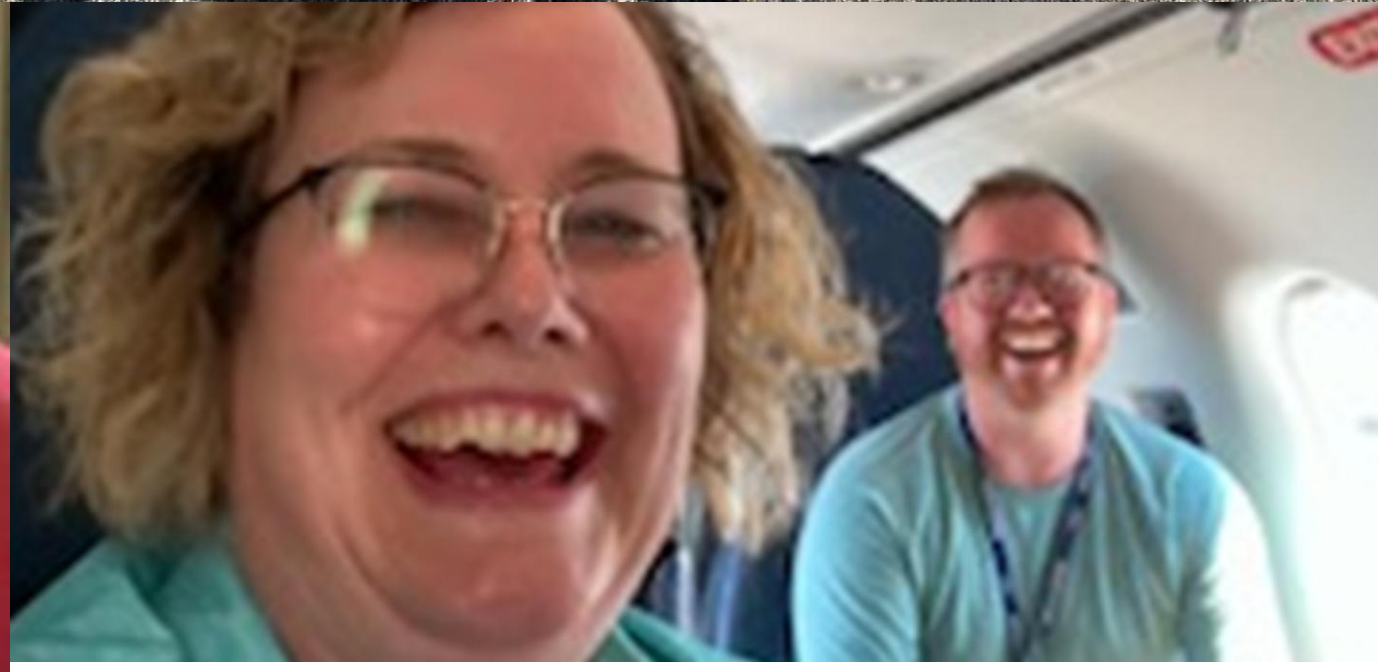


Medical Chests and Remote Consults

- Over 600 medical chests throughout WA
- Antimicrobial Stewardship

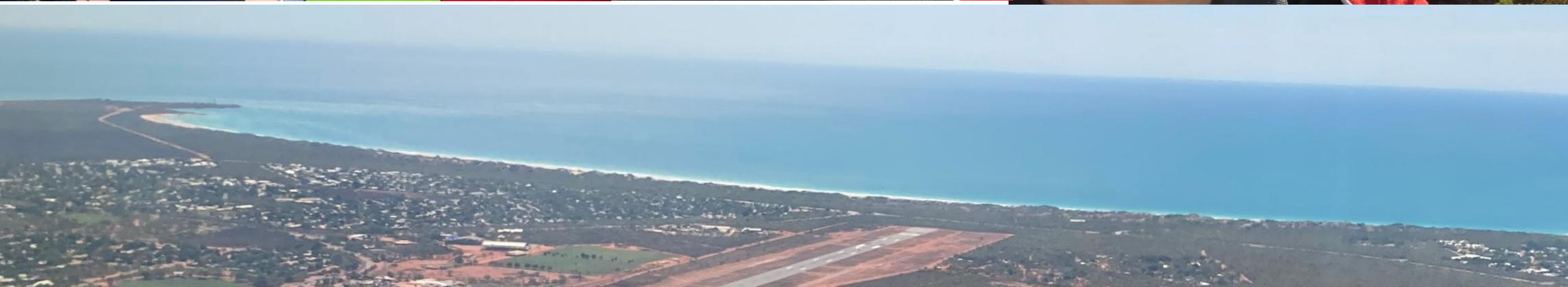


Not just a job!





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