

Glasgow Clinical Trials Unit Standard Operating Procedure

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| SOP number | 17.047 | Version | 2.0 |
| Title | Transfer of the Unwell Research Participant to Acute Care | | |

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| SOP category | 17 NHS GG&C Clinical Research Facility – Clinical | | | | |
| Staff category | Staff Category | R | A | C | I |
| | Nursing | X | | | |
| | Administration | X | | | |
| | Principal Investigator | X | | | |
| | Clinical Research Fellow | X | | | |
| | GCRF Manager | | X | | |
| | GCRF Associate Director | | | | X |
| | Senior R&I Manager | | | | X |

1. Scope

This procedure applies to all clinical staff working within Glasgow Clinical Research Facility (GCRF).

2. Purpose

The purpose of this SOP is to define the responsibilities and procedure to be followed when a research participant becomes acutely unwell and requires transfer from GCRF to acute care.

For the purpose of this SOP, Glasgow Clinical Research Facility includes:

- Glasgow CRF, Queen Elizabeth University Hospital
- Glasgow CRF, Glasgow Royal Infirmary
- Glasgow CRF, Gartnavel General Hospital
- Glasgow CRF, Royal Alexandra Hospital

3. Procedures

The following procedures are numbered sequentially; however based on assessment of the situation, the sequence need not be followed as described and individual elements of the process can be carried out by any member of staff assisting with the situation.

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3.1 Obtaining initial support

- 3.1.1 Seek assistance from the nearest available staff.
- 3.1.2 Inform the GCRF duty co-ordinator.
- 3.1.3 Obtain baseline observations using a NEWS (National Early Warning Score) chart for adults or CEWS (Children's Early Warning Score) for paediatrics.
- 3.1.4 Inform PI or designate to either carry out medical review or if not present delegate this responsibility to an appropriate member of medical staff until they are available.
- 3.1.5 Carry out appropriate interventions as deemed necessary.

3.2 Arranging admission to acute care

Admission will be arranged either by the PI or designate to an appropriate clinical area, or into the main acute service using the Emergency Department.

- 3.2.1 Transfer to the Emergency Department should be arranged with the porter service, using either a chair or a trolley, whichever is most appropriate. Physical transfers of the patient should adhere to all relevant Board policies (e.g. Moving and Handling).
- 3.2.2 The patient should be accompanied by the responsible registered nurse, who will take all appropriate documentation with them. If necessary, additional registered nurses/health care support workers/medical staff should escort the patient as determined by the clinical situation.
- 3.2.3 The research nurse should inform the relevant next of kin of the patient's need to be admitted to hospital. The patient may be able, and willing, to carry out this communication themselves.
- 3.2.4 The research nurse should remain with the patient until the Emergency Department have all the information they require to safely care for the patient. The research nurse should also remain with the patient until appropriate next of kin can attend the hospital.

3.3 Post admission

- 3.3.1 The research nurse must record the event in participant's health record and carry out all relevant study specific procedures related to patient hospitalization, with Serious Adverse Events reported as per protocol.
- 3.3.2 Where appropriate, a reflection and debrief of the situation should be carried out, including all members of the clinical and study team involved in the incident.
- 3.3.3 The research nurse should continue to follow the patient up whilst they are in hospital as part of their professional duty of care, irrespective of study requirements.

4. Referenced documents

- National Early Warning Score (NEWS)
- Children's Early Warning Score (CEWS)

5. Related documents

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- NHS GG&C Moving and Handling Policy

6. Document history

| Version | Date | Description |
|---------|------------|---|
| 1.0 | 08/01/2018 | Creation of SOP |
| 2.0 | 23/06/2023 | Update to SOP Template v2.0 Minor administrative changes |

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