

## REFERRER'S INFORMATION PACK





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We are Little Wings, a registered charity, providing regional NSW's sick kids and their families with free ongoing flight and ground transport during their treatment.

Our aim is to support families in rural and regional NSW, helping to reduce the financial burden, emotional strain and travel fatigue associated with long distance travel.

Here to ease the journey for regional families, with your help.

## Working with the Children's Hospital

The Little Wings service works with the Sydney Children's Hospital Network and John Hunter Children's Hospital under a signed Memorandum of Understanding.

We have a common goal of improving child wellbeing and agree to mutually support each other to supply a well coordinated, high quality and efficient service for patients and their families.

## **Little Wings Service**

We do this by flying patients and their families between hospital and home for free. The service is for patients who are no longer an inpatient of the Children's Hospital.

#### **Referral Process**

The demand for the Little Wings service often exceeds our capacity. As a charity with limited resources we rely upon you, as a staff member of the Children's Hospital, to help us by referring patients and their families to our service.

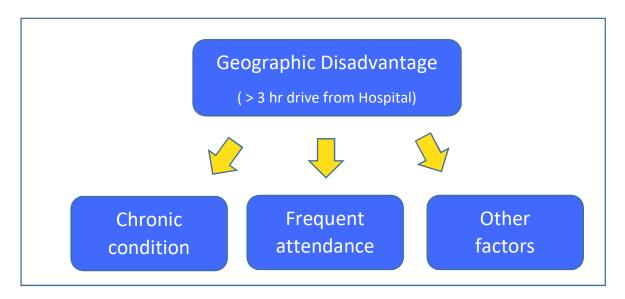
This ensures that we are equitably supporting patients and prioritising those families that are most in need of the service.





## **ELIGIBILITY CRITERIA**

We assist families who are disadvantaged by distance and can can not use or have difficulty using public and/or private transport. Priority is given to those patients that have chronic conditions and frequent attendance needs.



We understand that every situation is different and there may be times when a patient is in need of the service for other reasons. This could be due to a family's financial or social situation, or due to compassionate reasons.

Compassionate reasons may include returning a patient home for a short break in treatment, or transporting family members to hospital to visit a sick child. We appreciate the importance of the support of family during a difficult time, and aim to assist in these situations wherever possible.

## **Contact Us**

We encourage you to contact us <u>prior</u> to referring to the Little Wings service to discuss your individual patient's needs. Here we will be able to confirm the patient's eligibility for the service, and our availability and capacity to support.

Our Operation team can be contacted via phone or email on:

Phone: 0439 684 642

Email: flights@littlewings.org.au

Further information on the Little Wings service can also be found on our website at www.littlewings.org.au



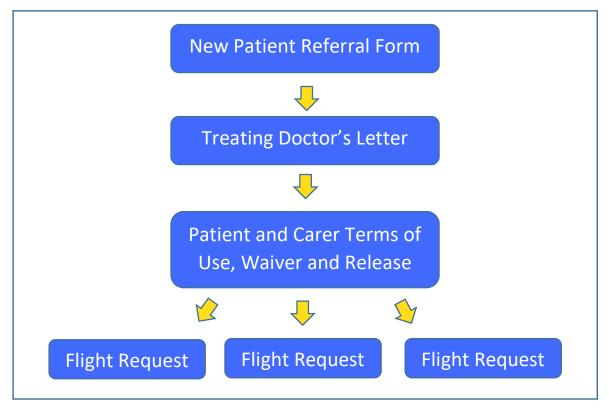
## PATIENT REFERRAL

#### **Initial Patient Referral**

- New Patient Referral Form
   This form introduces the patient to Little Wings providing their personal details, medical condition, and reason for referring to Little Wings.
- Treating Doctor's Letter
   The patient's treating doctor must complete this form to confirm that the patient is fit to fly without the need for clinical support.
   This form is only required upon initial referral of a patient unless the patient's medical condition has changed eg) surgery, hospitalisation etc.
- Patient and Carer Terms of Use, Waiver and Release
   This form is an important legal document and must be read and signed by all travelling passengers.

## **Ongoing Flight Requests**

Flight Request Form
 A flight request form must be completed for each travel request. This is a one page form which details the dates and times of requested travel.





# FLIGHT REQUEST AND SCHEDULING

Please consider the following important items when requesting a flight:

## Flight Request Submission

- Please provide as much notice as possible for a flight request, ideally at least 5 working days (Monday – Friday) notice. The more notice the better.
- Flight requests are to be submitted by **9am Thursday** for the week ahead. This will greatly assist with the flight allocation process and provisioning of volunteers allowing for more flights.
- If a patient has a number of upcoming appointments, we are happy to receive all known flight requests (eg. up to 3 months in advance)
- If you have a short notice request please contact our Operations team directly.

## **Flight Times**

- We appreciate that families typically wish to minimise overnight accommodation and time spent away from home however there are certain restrictions which must be adhered to ensure the safe travel of families:
  - For a family to fly home the same day of their appointment they must be released from hospital by 11am (1pm during daylight savings)
  - For a family to fly in on the day of their appointment, their appointment must be later than 2pm
  - For a family to fly in and out the same day of their appointment, their appointment must be no later than 11am with the release time not later than 1pm (3pm during daylight savings).
  - Flying in on the same day of appointment will not be possible for flights exceeding 200 nautical miles (370 kilometres).
- We highly recommend flying in the day prior to your appointment.
   Please note that Little Wings does not guarantee that a flight will be performed. There are many factors outside of our control including weather.
   Scheduling a flight for the day prior to an appointment ensures there are alternative travel options available to the family.
- During Winter due to fog conditions it is advisable to plan for late morning or afternoon flights
- During Summer to avoid hot and uncomfortable conditions and turbulence as a result of afternoon thunderstorms, we recommend early morning flights, or very late afternoon flights
- For critical patient transfers it may be advisable to seek air ambulance services



## FLIGHT BOOKING

- All forms should be completed, signed and scanned to flights@littlewings.org.au
- We will typically confirm your request within one working day of receipt
- At least 48 hours prior to flight, we will make direct contact with the family to confirm flight time, pickup location, baggage allowance and any special requirements
- If the flight is required to be delayed, cancelled or changed we will make direct contact with the family to advise with as much notice as possible
- If a flight is cancelled we will use our best endeavours to arrange an alternative solution for the passengers, including commercial air travel, however can not guarantee to accommodate all circumstances

#### Other Travel Considerations

- The cartage of oxygen (small cannisters) **may** be permitted but must be confirmed with us prior to travel
- Little Wings does not provide, nor are we able to carry medical equipment or medical personnel
- Collapsible wheelchairs and prams/strollers must be approved by us prior to travel
- We do have strollers available for use for families during their stay and encourage families to use these strollers where possible and when available
- A doctor's letter will be required for any travelling passenger that is greater than 28 weeks pregnant
- All passengers must weigh less than 120 kilograms
- All passengers must be ambulatory and able to enter and exit the aircraft without the assistance of the pilot
- Car seats are provided for ground transport travel between the airport and the hospital
- Ground transport between the airport and the hospital may also be arranged for patients that are travelling from interstate on IPTAAS flights



## **NEW PATIENT REFERRAL FORM**

Patient's Full Name	
Patient's Date of Birth	
Patient's Gender	
Patient's Home Address	
Carer's Name	
Carer's Mobile Phone	
Carer's Email Address	
Referrer's Name	
Referring Hospital	
Referring Department	
Month & Year Medical Treatment Started	
Medical Illness	
Patient's need: Please provide informate details of the patient's current mediane.	cion to support the patient's referral including brief dical condition, travel needs and individual of expected need for service and frequency of
Patient's need: Please provide informated details of the patient's current medicircumstances. Please include details of the patient's current medicircumstances.	dical condition, travel needs and individual
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## TREATING DOCTOR'S LETTER

I hereby refer the following patient and their family to the Little Wings service for free flight and ground transport patient between their hospital and home.

Patient Name:	
<ul> <li>In referring my patient I confirm the following:</li> <li>The patient is fit to fly without need for clinical support</li> <li>The patient is ambulatory and able to enter and exit a light aircraft without as or with the assistance of their carer</li> <li>The patient is able to fly without the need for medical equipment</li> <li>The patient's condition will not be exacerbated by flying in a light non pressuraircraft</li> <li>The travel is not mission critical</li> </ul>	
I understand that:	
<ul> <li>Travel is in a light non pressurised aircraft</li> <li>This is a non emergency flight and that there are no medical staff or equipme board</li> <li>There is a risk that a patient may miss their appointment due to flight cancelladelays (Note that in such circumstances we will use our best endeavours to arrange alternative solution for the passengers, including commercial air travel, howenot guarantee to accommodate all circumstances)</li> </ul>	ations or
Doctor's Name:	
Treating Hospital:	
Doctor's Phone Number:	
Doctor's Signature:	



## PATIENT AND CARER TERMS OF USE, WAIVER AND RELEASE

IMPORTANT: Read the contents of these Terms of Use carefully. It is intended to be a legally binding document. You may want to obtain legal advice about these Terms of Use. By signing these Terms of Use, you are expressly accepting its terms and conditions.

#### 1. Definitions

1.1 In these Terms of Use, unless the context indicates otherwise, references to:

**Claim** means any claim, loss, liability, damage, proceeding, order, judgments, costs (including legal costs on a full indemnity basis) or expense;

**Flight Request Form** means the form of request made by the Referrer to Little Wings, requesting the Services;

Patient means the child requiring the Services and medical treatment;

Patient's Carer or Carer means the parent(s), guardian(s), carer(s), family member(s) or support person(s) accompanying the Patient during receipt of the Services:

**Referrer** means any medical or allied health professional who refers the Patient to Us;

**Representative** of a party includes an employee, agent, officer, director, auditor, adviser, partner, consultant, contractor or subcontractor of a party;

**Services** means the services provided by Little Wings (now or in the future provided in relation to any existing or future Flight Request Form) for the benefit of the Patient, including ground and air transport services to assist the Patient attend specialised medical treatment and services;

**Terms of Use** means this document titled 'Patient and Carer Terms of Use, Waiver and Release' and any attachments to this document and any Waiver;

**We, Us, Our or Little Wings** refers to Little Wings Limited ABN 72 154 425 331 its officers, employees, agents, contractors, representatives, volunteers, assigns and successors; and

**You or Your** refers to the Patient and the Patient's Carer or any other person using the Services.

## 2. Acceptance

- You agree to accept (or are otherwise deemed to have accepted) these Terms of Use on the earlier of:
  - (a) the Patient's Referrer submitting a Flight Request Form to Little Wings where the Patient has been provided with a copy of these Terms of Use;



- (b) You signing these Terms of Use; or
- (c) You accepting delivery of the Services.

### 3. Booking of Services

- We are a not-for-profit charity aimed at assisting sick children to access specialised medical services and treatment. We are not a commercial flying operation.
- We are not obliged to provide Services to any person and may refuse provision of Services to any person at any time in Our absolute discretion, notwithstanding any earlier agreement.
- 3.3 We will use Our commercially reasonable endeavours to arrange and provide Services on the dates requested by Your Referrer, but cannot guarantee and make no warranty as to Our availability to provide the Services on the requested date.
- You or the Referrer must notify us of any changes to the Patient's request for Services (e.g. cancelling Your appointment, made other arrangements etc) as soon as possible.
- We will confirm acceptance of your Flight Request Form in writing. We will confirm the details of the Services including the time and place to meet within a reasonable time (and approximately 48 hours prior to the date of the flight). Please be on time as it extremely important that Our pilot stays on schedule.
- The Flight Request Form will require You (via the Referrer) to provide details of the number of Carers and Patients travelling on the Services and their weights. Only those Carers (or number of) approved by Us will be permitted to travel. Weight limits are critical factors when planning the flight. Please provide an accurate record of passenger weights on the Flight Request Form. You may be asked to be weighed by Us prior to boarding.

#### 4. During the Services

- We are not responsible for providing manual assistance to Patients before, during or after the Services. Where a Patient requires assistance to get into and out of an aircraft or vehicle, the Patient's Carer will be required to assist the Patient.
- 4.2 All Patients must be accompanied by the Patient's Carer for the duration of the Services. A Carer must be an adult (>18 years of age). We will not provide Services to children without a Carer.
- It is imperative You are contactable by Us during provision of the Services. You must provide Us with contact number/s (preferably mobile phone) prior to or on accepting the Services.
- 4.4 You agree to follow any reasonable direction from Us, including from any pilot or driver engaged by Us.
- You must wear appropriate clothing during the Services, including covered footwear.
- The combined baggage of persons travelling on the Services will be limited to 20 kilograms. All luggage must be in soft material 'sports bags'. No hard framed suitcases will be permitted to travel. Any changes to the agreed baggage allowance must approved by Us prior to the Services being provided.



- The Services will include ground transportation between any airport and the hospital, where requested and approved by Us. The Services will not include ground transportation from Your home to or from the airport. You must make your own travel arrangements in this regard.
- When travelling in any vehicle, all children must be secured in a child restraint or booster seat complying with all laws and required Australian standards. We will make reasonable efforts to provide child restraints on request of the Patient, however it is the responsibility of the Patient and the Patient's Carer to ensure that all children are provided with and are appropriately fitted with a car seat that complies with all laws.
- Where we are not able to provide the Services for any reason (including but not limited to inclement weather, lack of pilots resources or any other event) We will use reasonably commercial endeavours to make alternate transport arrangements, but We are not responsible for any loss or delays arising from cancelled or delayed Services. We will notify the Patient as soon as reasonably possible if there are changes to or cancellation of the Services.

## 5. Media releases and use of images

- You understand that in order to continue provision of this free community service, We rely upon building community awareness which in part is obtained through publicity.
- By checking the box on the signing page of these Terms of Use, You hereby give Us Your permission to include your name, photograph, audio-visual material and information gained from You for publicity purposes in promotional material whether it be through television, radio, print, online or other advertising media.

## 6. Acknowledgement and Acceptance of risk

- In consideration of Us providing the Services for the benefit of the Patient, You, the undersigned, each severally and unconditionally acknowledge and agree that:
  - (a) The Services provided by Us are provided on a humanitarian basis and are being provided free of charge for the benefit of the Patient;
  - (b) You personally and voluntarily accept and assume all risk arising out of Your use of the Services. You acknowledge that such risks may include (without limitation):
    - (i) the inherent risk from flying in aircraft or driving or travelling in vehicles;
    - (ii) turbulence and all other adverse or inclement weather and flight conditions;
    - (iii) mechanical or equipment malfunctions and failures, including those arising out of negligence;
    - (iv) emergency landings; or
    - (v) delays or cancellation in the provision of the Services including arising out of or in connection to (i) to (iv) above.
- 6.2 You acknowledge and agree that:
  - (a) You have considered other forms of transportation and, after considering such, You have chosen to accept the Services subject to these Terms of Use.



- (b) You are not required to accept the Services and You do not have a medical condition which prohibits You from using the Services. You have obtained, or are not required to obtain, medical professional advice on Your suitability to use the Services and You are aware of the risks of flying whilst suffering any medical condition (including claustrophobia, heart condition, physical discomfort or impairment, nervousness, anxiety, panic attacks or pregnancy).
- (c) the Services do not constitute a medical flight or transport arrangement and no vehicle or aircraft will be equipped with any medical services, equipment or life support. The vehicles and aircraft provided in the Services are not charter or ambulance aircraft and are not performing any ambulance or similar function or service. You understand that no medical assistance is available to You by or from Us on any aircraft or on the ground.

## 7. Release

- 7.1 To the maximum extent permitted by law, You unconditionally and irrevocably release Us and Our Representatives from all and any Claims arising directly or indirectly from the delivery to, or use of the Services by You, including (but not limited to):
  - (a) any death or injury to You;
  - (b) any or loss, damage or destruction to Your real or personal property; and
  - (c) any delay, inability, cancellation or failure by Us to commence or complete the Services,

including arising from any negligent act or omission of Little Wings or its Representatives.

- 7.2 Nothing in these Terms of Use operates to limit or exclude:
  - (a) liability that cannot be limited or excluded by law;
  - (b) Our liability resulting from any fraudulent or other unlawful act or omission.
- 7.3 To the extent permitted by law, You agree that Part 4 of the *Civil Liability Act* 2002 (NSW) and legislation having any similar effect in other states and territories of Australia, in respect of Little Wings and its Representatives, are excluded in relation to all and any rights, obligations or liabilities sought to be enforced as a breach of contract or a claim in tort or otherwise.
- These Terms of Use may be pleaded and tendered by Us as an absolute bar and defence to any Claims brought or made by You or on Your behalf.

#### 8. Indemnity

- You unconditionally and irrevocably indemnify Little Wings and its Representatives against all and any Claims arising directly or indirectly from the delivery to, or use of the Services by You, including (but not limited to):
  - (a) any death or injury to You;
  - (b) any loss, damage or destruction to Your real or personal property; and



(c) the delay, inability, cancellation or failure to complete or commence the Services, including arising from any negligent act or omission of Little Wings or its Representatives.

## 9. Parent/guardian undertaking

9.1 Where a Passenger is under the age of 18 at the time of accepting and/or using the Services, a parent's (or legal guardian's) signature on behalf of that Passenger will be binding on both the parent (or legal guardian) and that Passenger.

## 10. Statement of understanding

- 10.1 You acknowledge that:
  - (a) You have been advised to seek legal advice and have had sufficient time to read and understand these Terms of Use in its entirety prior to using the Services;
  - (b) You have read and understood these Terms of Use;
  - (c) You are over the age of 18 (or otherwise have a legal parent or guardian who will accept these Terms of Use on Your behalf) and are legally competent to provide this waiver, release and discharge;
  - (d) You understand the conditions set out in these Terms of Use are binding, are intended to have legal effect and are not merely a warning or recital; and
  - (e) You understand Little Wings and its Representatives are relying upon each of the acknowledgements set out in these Terms of Use.

#### 11. General

- A duplicate, photocopy, facsimile image or electronically reproduced and stored copy of these Terms of Use (a 'Copy') shall have the same legal effect as the original Terms of Use. If the original Terms of Use are not provided, lost, destroyed, misplaced or otherwise not available, a Copy will be substituted for the original Terms of Use;
- The terms of these Terms of Use may not be modified, unless agreed in writing by You and Us;
- These Terms of Use, contains the entire agreement between You and Us with respect to its subject matter and supersedes all earlier representations and agreements made by or existing between Us and You with respect to its subject matter. You acknowledge that, but for the representations made by Us in these Terms of Use, We would not have agreed to provide the Services; and
- These Terms of Use is governed by the laws of New South Wales. You submit to the non-exclusive jurisdiction of courts exercising jurisdiction there.



## **EXECUTED AS A DEED POLL:**

	ou give permission to Little Wings to use Your in accordance with Clause 5 of these Terms of
Signed, sealed and delivered by You in the presence of:	) ) )
Signature of Witness	Print Name
Print name of Witness	Signature
Date	
	Address
If You are under 18 years of age: Signed, sealed and delivered by Your Parent or Guardian in the presence of:	) ) ) )
Signature of Witness	Print Name
Print name of Witness	Signature
Date	
	Δημες



## **FLIGHT REQUEST FORM**

Ground Tran Please email a cop		cer confirmations t	to the I	Flight Coordinate	or for all "Groun	d Trans	port" Only Req	uest		
Referrer Name					Today's	Date				
Work Phone	-	Р	ager		Work M	obile				
Referring Hospital					Accommod	ation				
Referring Department					Referrer's	Role				
Patient's Full Name							Male	/ Female		
Patient's Illness (Layperson's Terms)										
Patient's Medical Condition						Unchanged / Changed				
PLEASE NOTE: An updated Tre	ating Doctor's Let	ter is required if the	patier	nt's condition has						
Patient's Date of Birth	Accurate Weight (kg)	Can Patient Walk Unaided?	,	Is Patient Infectious?  Is Patient Severely Immuno-compromised?			Is patient able to fly without medical assistance in a non- pressurised light aircraft?			
		Yes / No		Yes / No	Yes / No		Yes / No			
PURPOSE OF THIS TRIP: eg)	Routine Scans									
Nearest Airport to Home		Nearest Regional R Airport			nal RPT					
TRIP TO HOSPITAL	One <sup>v</sup>	Way / Return		TRIP FROM H	TRIP FROM HOSPITAL			Tick here if return details unknown		
Origin		Origin								
Destination		Destination								
Travel Date		Travel Date								
Appointment Date		Release Date								
Appointment Time				Release Time						
Drop Off Location		Pick-Up Location								
Travelling Companion Full Name (as it appears on your ID)	Relation	nship to Patient		curate Weight (Kg) <u>st</u> be <120kg)	Mobile Phone		Date of Birth			
WEIGHT LIMIT: A maximum lu	ggage weight of 2	20kg no exception	ns unle	ss prior approva	l was obtained.	ONLY	soft carry bags	will be permitted.		
SPECIAL REQUESTS: Please indicate below whether additional equipment or luggage is required and provide all necessary details (eg,brand of equipment, weight, folded dimensions etc). All special requests need to be cleared with the Operations team prior to flight.  Note that car seats are provided for travel and strollers are available to be borrowed from Little Wings upon request, please indicate below if required.										
Medical Equipment	Oxygen	Wheelchair E			Extra Lugga	xtra Luggage Loan Stroller				
<b>FLYING CONSIDERATIONS:</b> Please provide details of passengers we should be aware of for flying eg) Motion sickness, fear of flying, claustrophobic, pregnant travelling companion, any medical condition of travelling companion we need to be aware of										