

STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title	EMS (Escalation Management System)	Doc. No.	OP230
Scope	Operational teams		
Purpose	An early warning system of demand and capacity pressures within all aspects of urgent and emergency care across the health economy and wider. At a glance “near real time” geographical presentation of escalation status across health economies.		
Guidelines	EMS updates are to be completed regularly throughout each shift to provide a true reflection of pressures within the system.		
PROCEDURE		RESPONSIBILITY	
1	Access EMS using the following link: emsplus.nhs.uk Log in using your individual log in details.	Shift Manager	
2	Mandated EMS updates must be completed between the following times: 07:30 – 09:30 14:30 – 16:30	Shift Manager	
3	All EMS triggers must be recorded accurately based on the current service performance. EMS trigger guidelines (Appendix A)	Shift Manager	
4	EMS commentary must document rational for each trigger including actions taken.	Shift Manager	
6	At times of escalation we may need to inform NHS 111 of call back delays – Changes to call back times MUST be agreed with the manager on call, reviewed regularly and for a minimum amount of time.	Shift Manager	

5	The Shift Manager is responsible for monitoring service escalation and must ensure EMS updates are completed at any time any of the EMS triggers change including de-escalation.	Shift Manager
6	Following each EMS update an automated email will be sent to all managers and executives that participate in the on call rota informing them of the latest service update.	Shift Manager
7	Following each EMS update the Shift Manager must ensure that the appropriate actions are taking place in accordance with the EMS Action Cards which can be found within the Business Continuity Action Cards.	Shift Manager

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Title		EMS (Escalation Management System)		Doc. No.	OP230
Version			v3		
Supersedes			v2		
Approving Managers/Committee			Deputy Director of Urgent Care		
Date Ratified			September 2017		
Department of Originator			Integrated Urgent Care		
Responsible Executive Director			Director of Service Delivery		
Responsible Manager/Support			IUC Service Manager		
Date Issued			December 2019		
Next Review Date			December 2021		
Target Audience			Shift Managers/On Call Managers		
Version	Date	Control Reason		Accountable Person for this Version	
V1	Sept 2017	New SOP		Head of Service	
V2	Oct 2018	Reviewed and updated as requested		Head of Service	
V3	Dec 2019	Reviewed and updated as requested		Deputy Director of Urgent Care	
Reference documents		Electronic Locations		Locations for Hard Copies	
		Primary Care 24 Intranet / Corporate Policies/ Current SOPS/		Standard Operating Procedures File in the Call Centre.	
Document Status: This is a controlled document. Whilst this document may be printed, the electronic version maintained on the PC24 Intranet is the controlled copy. Any printed copies of the document are not controlled.					

Appendix A – EMS Triggers

EMS Triggers	Level 1 - Planned Operational		Level 2 - Moderate Pressure		Level 3 - Severe Pressure		Level 4 - Extreme Pressure	
	OOH		OOH		OOH		OOH	
Clinical Staffing	1	Staffing levels 90% and above to Rota profile requirements	1	Staffing Levels 80% - 90% to Rota profile requirements	1	Staffing Levels 70% - 80% to Rota profile requirements	1	Staffing Levels 70% and below to Rota profile requirements
Operational Staffing - Skill set	2	Monday to Thursday - Staffing Levels 90% and above to Rota requirements Friday to Sunday - Staffing Levels 95% and above to Rota requirements	2	Monday to Thursday - Staffing Levels 80% - 90% to Rota requirements Friday to Sunday - Staffing Levels 85% - 95% to Rota requirements	2	Monday to Thursday - Staffing Levels 70% - 80% to Rota requirements Friday to Sunday - Staffing Levels 75% - 85% to Rota requirements	2	Monday to Thursday - Staffing Levels 70% and below to Rota requirements Friday to Sunday - Staffing Levels 75% and below to Rota requirements
NQR Compliance and Demand - DCA	3	DCA pool within expected levels and matches capacity	3	25% of cases in the DCA pool are expected to breach	3	50% of cases in the DCA pool are expected to breach	3	75% of cases in the DCA pool are expected to breach
Urgent Care Centres	4	25% of Urgent Care Centres booked 2 hours in advance.	4	45% of Urgent Care Centres booked 2 hours in advance.	4	55% of Urgent Care Centres booked 2 hours in advance.	4	70% of Urgent Care Centres booked 2 hours in advance.
Home Visits	5	Visits awaiting to dispatch match capacity to deal with these within NQR timeframes	5	Expect to breach more than 25% of visits awaiting dispatch	5	Expect to breach more than 50% of visits awaiting dispatch	5	Expect to breach more than 75% of visits awaiting dispatch
Technical Issues	6	No technical issues	6	Some technical issues causing moderate impact to service delivery	6	Some technical issues causing severe impact to service delivery	6	Technical issues causing extreme impact on service delivery. Eg. Wavertree HQ with loss of IT.
Environmental Issues	7	No Environmental factors affecting service provision	7	Environmental factors causing moderate pressure on service provision	7	Environmental factors causing severe pressure on service provision	7	Environmental factors causing extreme pressure on service provision