

INTEGRATED URGENT CARE SERVICE DELIVERY UNIT

NHS 111 First Workbook

V5

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THE SHIFT MANAGER BASED AT HEADQUARTERS WILL HOLD A HARD COPY. AN ELECTRONC COPY OF THIS DOCUMENT CAN ACCESSED VIA UC24 INTRANET.

Document Change History

Version	Date	Date of release	Changed by	Reason for Change
V1	November 2020	November 2020	G.Kearns	Document Created
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V3	December 2020	December 2020	G.Kearns	Amended the email address on the manual process – Appendix 1
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V5	December 2020	December 2020	A.Cameron	Added visual help sheets.

Contents

1.	Introduction	 4
2.	Purpose	 4
3.	Guidance	 4
4.	Admin Procedures	 5
5.	Call Flows and visual help sheet	 7
		 10

1. Introduction

This Workbook forms an integral part of the management and governance arrangements of the PC24 NHS 111 First Service. The workbook procedures will ensure compliance with statutory requirements and best practice.

The NHS 111 First service is an extension to the existing Integrated Urgent Care (IUC) Service accessed through NHS 111. It aims to encourage the use of NHS 111 Online and telephony as the primary means to access urgent health care but with a more prominent public facing message – "NHS 111 First".

The term **NHS 111 First** refers to the development of the current NHS 111 Service to offer patients a different approach to the way they access and receive urgent healthcare. It is a new public facing brand which means:

- NHS 111 (both online and via existing telephony) is the first point of contact when experiencing an urgent but not life threatening health issue;
- a move away from (but not exclusion of) going to a physical location as the first choice to access healthcare;
- embracing remote assessment and the technology which supports it;
- preventing nosocomial (hospital acquired) infection by ensuring patients do not congregate together in ED waiting rooms;
- ensuring patients get a clear direction of what they need to do and where they need to go in order to resolve their issue;
- Protecting those most at risk by giving them an enhanced service.

2. Purpose

The purpose of this Workbook is to support the IUC department by providing instruction and guidance to staff, which will ensure that robust processes are in place and consistently followed by staff.

NHS 111 (both online and via existing telephony) is still the first point of contract for patients when experiencing an urgent but not life threatening heath issue.

This Workbook does not replace any corporate policies.

3. Guidance

Monday to Friday 08.00 – 18.29, for patients registered with a Liverpool, Knowlsey. Halton and Warrington CCG practice, PC24 will provide in hours cover to the clinical assessment service (CAS) and lower acuity ambulance responses.

Monday to Sunday (including bank holidays) 18.30 till 07.59, for patients registered with a Liverpool, Knowsley, Halton and St Helens CCG practice, PC24 will provide out of hours cover to the clinical assessment service (CAS) and lower acuity ambulance responses.

4. Admin Procedures

Shift Process

When arriving on shift it is important to follow these procedures to ensure operating standards are met.

On arrival, ensure all 111 First G.Ps are issued with a laptop from the meds room and that the laptop is checked for damage and signed for. The sign in and out sheet is located on a clipboard with the laptops. Always ensure laptops that are not in use are locked away in the meds room.

The dispatchers laptop is numbered L1088. This laptop must be used by the dispatcher to be able to hear the alarm for the 111 cases awaiting dispatch within the Adastra system.

CAS Calls / Lower Acuity Ambulance Response

Patients will be assessed by NHS 111 using NHS Pathways system.

If the outcome for patient is for a low acuity ambulance or to attend an "Emergency Department" (ED) For patients who refuse these dispositions but agree to seek further clinician advice, the call will then be sent electronically to PC24 using the Adastra electronic web link.

Once the call has been received electronically at PC24, a PDS search will need to be carried out before dispatching the call into the DCA pool.

Out of Area Calls

Calls received for patients who are not registered with a GP practice within the CCG catchment area or are not currently within the catchment area, for in hours and out of hours cover, operational staff to make contact with NHS111 providing them with the "external case ID number" and ask for them to take the call back.

Temporary Resident Process

Calls received for patient who are within the CCG catchment area but are not registered with a GP within this area, for in hours and out of hours cover, select the appropriate registration type on Adastra either "INT or TR" from the drop down menu, enter the appropriate details within the **Doctor** field., within the **Surgery** field type "PC24 in House Practice"

Pass Back Process to NWAS (Ambulance Control)

For calls received and triaged by PC24 who following an assessment require an emergency ambulance, PC24 are to make contact with NWAS via the current emergency contact route by either dialing 999 or via ambulance control.

When contacting NWAS, PC24 to advise of the clinical outcome of their assessment and inform them the call had previously passed from NHS111.

Onward Referral Process

For calls received and triaged by PC24 who require an onward referral into the following services:

Walk in Centre (WIC)
Urgent Treatment Centre (UCC)
Warrington Rapid Community Response Service

This is to be completed using appendix 1 – manual process

For calls received and triaged by PC24 who require an onward referral into Emergency Department (ED), this to be completed using the call flow for operational and clinician.

Failure of calls following the electronic ED referral within Adastra, this is to be completed using appendix 1.

For calls received and triaged by PC24 who require further intervention from their own GP surgery, this is to be completed using the following process.

- Close the call on the Adastra system
- Ring the surgery with the details of the patient
- Send the details of the patient electronically via the Adastra system.

Please note, during the in-hours period all calls received for the CCG catchment areas, are be completed within Adastra. No calls are to be forwarded within Adastra for a UCC appointment or home visit.

Safeguarding / Vulnerable Patient's

To document any safeguarding concerns or flag any vulnerable patients within the current consultation on Adastra. This is also to be flagged to the shift manager on duty and to be recorded on Datix.

NHS Service Finder

In order for Clinician's and operational staff to ensure a patient gets the right care, it is vital that they know what services are available in the local area to the patient.

This service allows clinician and operational staff to search for NHS services available for patients within their catchment area for onward referral. NHS Service Finder DOES NOT make electronic referrals to any services.

You can register for this service using the link below.

https://finder.directoryofservices.nhs.uk/#/login

5. Call Flows - Operational & Clinician

Patients will be assessed using NHS Pathways system. If the outcome for patient is for a low acuity ambulance or to attend an "Emergency Department" (ED) For patients who refuse these dispositions but agree to seek further clinician advice, the call will then be sent electronically to PC24 using the Adastra electronic web link.



Once the call has been received electronically at PC24, a PDS search will need to be carried out. Before dispatching the call into the DCA pool, please clearly document at the top of the call "ED suitable" This will notify clinicians, call is suitable for NHS 111 First ED bookable appointments.

Please note ACPP is not to be used on any CAS calls received from NHS 111 unless when needed to contact a patient, they describe ILTC symptoms.



Once the call has been dispatched into the DCA pool, a clinician will need to make contact with the patient within the following timeframes, depending on the priority of the call:

Urgent: Call back within 20 minutes

Less Urgent: Call back within 60 minutes



Once the call has been triaged by a clinician, the call will be completed using the on line clinician tabs on Adastra.



Completed at triage no further action required.



Call triaged, patient requires onward referral to ED or UCC.



Within the current consultant screen on Adastra, Clinician to select "111 First ED Appointments"



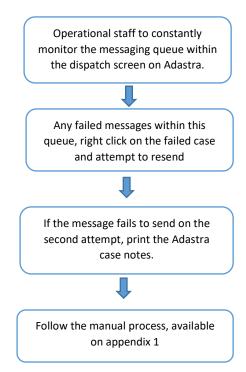
For clinician's who cannot locate a suitable appointment slot within "NHS 111 First ED Appointment Diary" Clinicians are required to select the overflow diary "NHS111 Fist ED Overflow Diary" Within this clinicians to select the appropriate "ED Department", Select the "email option" within this screen.

Once confirmed the case has been successfully sent, Clinicians to continue to complete the call selecting the appropriate "information Outcome" and final priority of the call before closing this within Adastra



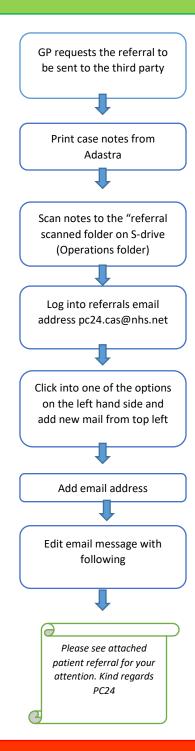
Within the NHS 111 First ED Appointment diary, clinician to select the appropriate "ED department" To then select the next bookable appointment for the patient within the required priority, that the patient is to be seen within. Select the "email option" within this screen. Once confirmed the case has been successfully sent, Clinicians to continue to complete the call selecting the appropriate "information Outcome" and final priority of the call before closing this within Adastra

Adastra Messaging Queue (Operational)



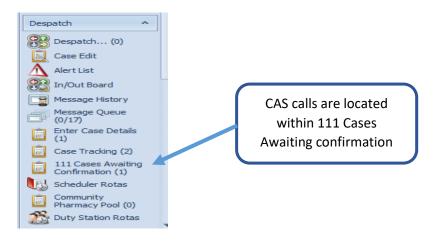
Appendix1 (manual process)

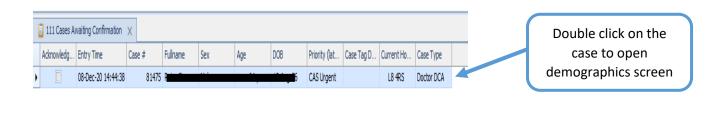
Sending referrals

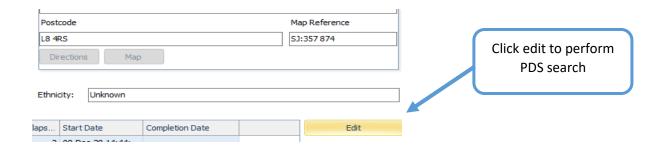


Once the email has been sent the document must be deleted from the shared folder without delay!

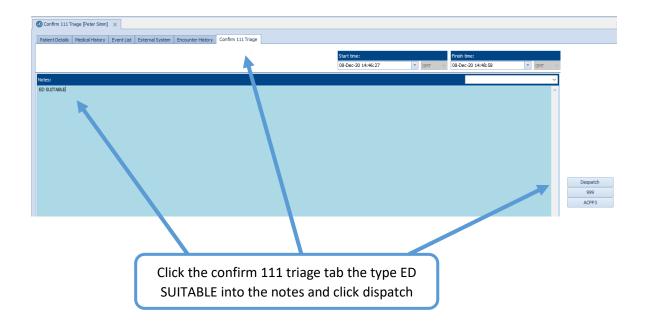
Dispatcher and Clinician Visual Call Flow Help Sheet

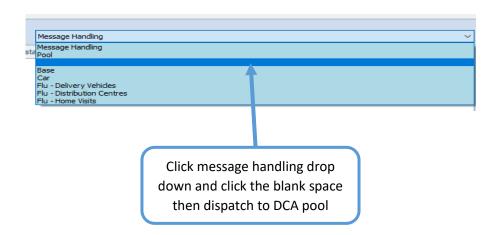


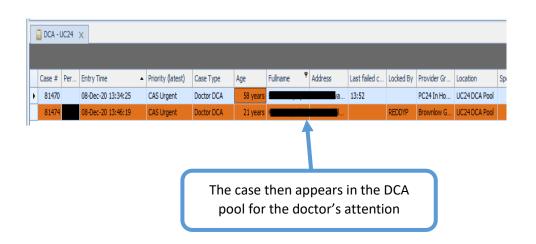












There are 2 different urgency cases for 111 First. These are as follows:

CAS URGENT = These cases show up as brown colour on the DCA screen and must be triaged within 20 minutes



CAS LESS URGENT = These cases show up as a salmon colour on the DCA screen and must be triaged within 1 hour



111 First AED Appointment Timescales

Appointments booked into the AED by the 111 first triaging GP do not have a particular time frame in which they need to be booked. For example, if the GP triages a patient at 9am, the patient can be booked in for an appointment at 9pm providing the GP feels this is safe and acceptable to do so.

111 First appointment Diaries

The opening times for AED appointment diaries are as follows:

Royal Liverpool University Hospital = Open 24/7. One appointment per hour

Aintree university Hospital = Open 24/7. One appointment per hour

Whiston Hospital = Open 24/7. One appointment per hour

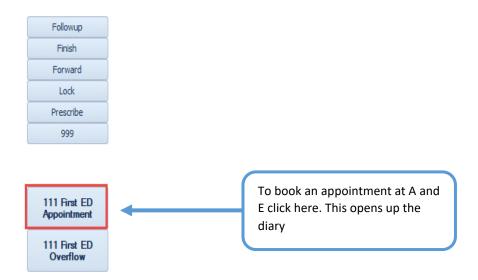
Warrington Hospital = Open 24/7. One appointment per hour

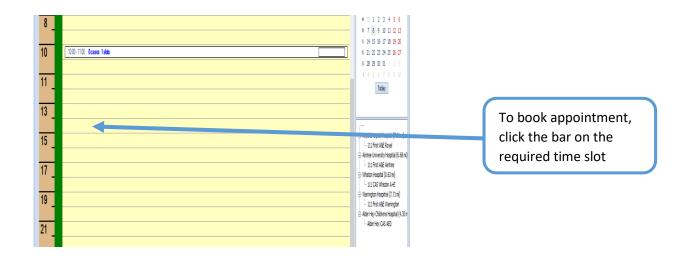
Alder Hey Children's Hospital = Open 9am- 5pm 7 days per week. One appointment per hour

Ormskirk ED (paeds) = Open 08:00 - 00:00

Southport ED = 24/7

Following GP consultation, if the GP decides the patient is to have an appointment at AED, the next steps are to be followed.





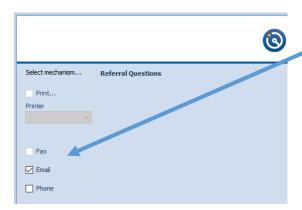




If there are no available appointments, click the overflow tab and advice patient to attend A and E without the appointment



Select the location you have referred to, then select Email..... Your consultation will then be sent to this location.



Appendix 2 - Onward Referral Manual Process Details

Whiston ED Department

0151 430 1093

Warrington ED Department

WHH.EDReferrals@nhs.net

Royal ED Department

rlhed@liverpool.nhs.uk

Aintree ED Department

ED.clerical@nhs.net

Runcorn UCC

WHH.UCCReferrals@nhs.net

Widnes UTC referrals

widnes.ucc@nhs.net

Southport ED

Soh-tr.edreceptionists@nhs.net

Ormskirk ED

soh-tr.paedsaereception@nhs.net

Southport ACU

Will accept referrals between Monday and Friday, 09:00 – 17:00 via telephone (01704 704807) followed by an email with patient details to Soh-tr.acu@nhs.net

Warrington Rapid Community Response Service

01925 444 220 (Telephone Referral only)

Walk in Centre - single point access

0300 100 1004 (number available for clinician, operational staff and patients.