

STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title	Repeat Out-of-Hours Calls About the Same Patient in a Short Time Period		Doc. No.	CL024
Scope	Clinical Directorate	Operational Directorate		
Purpose	To ensure that patients who contact the service, on more than one occasion, over a short period of time, have this fact highlighted to the clinician responsible for Definitive Clinical Assessment (DCA) of the call and taken into account when deciding if a face-to-face contact should be offered.			
GUIDELINES	<p><u>Definition of Repeat Calls</u></p> <p>A single continuous out-of-hours period is any length of time during which Primary Care 24 has unbroken clinical responsibility without an intervening period of in-hours care from their own General Practitioner (GP). Two or more calls about the same patient within such a period or in consecutive single periods meets the requirement for application of this SOP.</p> <p>You should also consider applying the principles contained in this SOP to multiple calls within slightly longer timescales (up to a week), especially when the patient has not consulted their own GP in the interim period.</p> <p><u>Background</u></p> <p>The Penny Campbell enquiry (2007) identified a number of deficiencies in the way that out-of-hours services manage calls, and made several recommendations for action. In particular, it was noted that patients who contact the service on multiple occasions, over a short timescale, should be offered face-to-face assessment to minimise the risk of failing to diagnose serious pathology.</p>			
PROCEDURE			RESPONSIBILITY	
1	Patient demographics to be recorded on the system. Pathways processes to be followed.		NHS 111 Health Advisor	
2				

	Check if any previous calls have been made about this patient during this or the previous continuous period of out-of-hours cover. If so record the fact in the clinical details section for the clinician carrying out the DCA.	NHS 111 Health Advisor
3	If the call is being passed by a Health Care Professional please ensure that all the relevant information is recorded in the 'Reported Condition' screen including the job title of the Health Care Professional and their relationship to the patient.	Primary Care 24 Referral Coordinator
4	Dispatch the call into the 'DCA' pool with the priority set according to Pathways.	Primary Care 24 Referral Coordinator
5	The clinician is to check if recent calls have been made and makes the decision on whether to offer a face-to-face consultation after reading the clinical details of the preceding call(s) to Primary Care 24. Contacting the patient and making a clinical assessment.	Primary Care 24 Clinician
6	The clinician should ask the permission of the patient and check EMIS Web or the Summary Care Record (SCR), where this is available, for contact with their own GP in the recent past to see if a pre-determined plan is in place for management of the presenting problem. Decisions on management should, where clinically appropriate, be consonant with their own GPs plan.	Primary Care 24 Clinician
7	The decision to offer a face-to-face assessment should take into account that the patient has been in contact with the service during the same out-of-hours period and that Primary Care 24 clinical guidelines suggest a default position that a face-to-face contact should be offered unless there are extenuating circumstances.	Primary Care 24 Clinician
8	If a face-to-face consultation is not offered, the reasons for not doing so should be clearly recorded in the clinical record. If an offer of a face-to-face consultation is refused, this must also be documented.	Primary Care 24 Clinician
9	Whether or not a face-to-face consultation occurs, please ensure that all positive and important negative clinical observations are recorded	Primary Care 24 Clinician

	to a high standard in the notes. Remember that good medical notes are necessary to demonstrate high quality clinical care.	
10	Ensure that the patient is satisfied with the action plan and safety-netting advice before closing the consultation. Any action plan or safety-netting advice should also be clearly recorded in the notes.	Primary Care 24 Clinician
11	Primary Care 24 will inform the patient's registered GP practice the next working day that multiple calls have been made to the service over a short period of time so that the practice can make appropriate arrangements to follow-up.	Primary Care 24 Administration Team

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Title		Repeat Out-of-Hours Calls About the Same Patient in a Short Time Period		Doc. No.	CL024
Version			v3		
Supersedes			All previous versions		
Approving Managers/Committee			CG & R Committee		
Date Ratified			July 2013		
Department of Originator			Clinical Practice		
Responsible Executive Director			Director of Quality and Patient Safety		
Responsible Manager/Support			Clinical Governance Manager		
Date Issued			July 2013		
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Target Audience			Clinical and Operational Staff		
Version	Date	Control Reason		Accountable Person for this Version	
v1.2	July 2013	Change of template and grammatical amendments		Medical Director / CG Manager	
v1.3	November 2013	Modified title, clarification of process, inclusion of EMIS Web and SCR		GP / Clinical Lead / Medical Director	
v1.4	October 2015	Change of responsible director & updated processes		Medical Lead	
v2	February 2018	Reviewed and updated as required		Medical Lead	
v3	June 2020	Reviewed and updated, change of organisation name and template		Medical lead	
Reference documents		Electronic Locations		Locations for Hard Copies	
		Primary Care 24 Intranet		Standard Operating Procedures File in the Call Centre	
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