

STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title		Clinical Advice Service (CAS) – Out-of-Hours		Doc. No.	OP228
Scope		Operational and Clinical Directorate			
Purpose		To enable the patient to receive the right care earlier in the care pathway which reduces the potential of the patient accessing high acuity services unnecessarily.			
Guidelines		<p>Patients in the Halton, Knowsley and Liverpool CCG areas, who originally dialled NHS 111, and whose assessment using the NHS Pathways system was suggestive of the need to attend at an Emergency Department (ED) for face-to-face assessment and treatment.</p> <p>These patients will normally have received telephone advice to attend at their nearest ED within a given timeframe, most commonly within 60 minutes, but sometimes 240 minutes.</p> <p>‘CAS’ will be operational 24 hours a day, 7 days a week.</p> <p>‘CAS’ is subject to a 3 phase process setting out clear pathways for patients in each phase.</p> <p>Escalation processes are included within the SOP.</p> <p>In-Hours / Out-of-Hours Handover:</p> <p>Cases received before 18:30 will be managed by the in-hours team.</p> <p>Cases received before 08:00 will be managed as per standard process with ‘Pathfinder’ calls.</p>			
PROCEDURE				RESPONSIBILITY	
PHASE 1 - Live					
1	In the first phase patients, which have been identified via the agreed list of ‘NHS Pathways’ disposition codes, will be passed directly via a technical link to UC24 from the NHS 111 Adastra system.			NHS 111	
	All patients will be assessed in the NHS 111 service, using ‘Pathways’, and where their reported symptoms are suggestive of a need for treatment at an Emergency Department (ED), but they may				

	<p>benefit from further senior clinical assessment from a 'General Practitioner', the patient will instead be advised to wait for a call-back from UC24 for further detailed assessment. The clinical record will then be passed to UC24 via Adastra.</p> <p>Patients will have the referral process explained to them and will have the option to refuse this option. If they do refuse, they will be referred instead to their nearest ED as is 'normal' practice.</p> <p>Following referral, included patients will receive a call-back from a UC24 clinician within the following timescales:</p> <table border="1"> <thead> <tr> <th>DX Code</th><th>NHSP Recommended outcome</th><th>UC24 call back requirement</th></tr> </thead> <tbody> <tr> <td>DX02</td><td>Attend ED within 1 hour</td><td>20 minutes</td></tr> <tr> <td>DX03</td><td>Attend ED within 4 hours</td><td>60 minutes</td></tr> <tr> <td>DX89</td><td>Attend ED within 12 hours</td><td>60 minutes</td></tr> </tbody> </table>	DX Code	NHSP Recommended outcome	UC24 call back requirement	DX02	Attend ED within 1 hour	20 minutes	DX03	Attend ED within 4 hours	60 minutes	DX89	Attend ED within 12 hours	60 minutes	
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2	<p>Upon receipt of the case the referral coordinator must telephone the patient using the following script:</p> <p>"Hello, I am a referral coordinator from Urgent Care 24. I have received your call from NHS 111. I need to confirm some demographics with you before I place this call on the system for one of our clinicians to call you back."</p> <p>Please confirm the patient is at the address given, if not note the current address location on the Adastra system.</p> <p>Check the patient is covered by Urgent Care 24, if not you must contact NHS 111, provide the 'External Case ID' number and ask them to take the call back. NHS 111 contact number is located under the 'Agency' tab on Adastra.</p> <p>ACPP is NOT to be used on 'CAS' calls passed by NHS 111, with the exception of a patient who describes an ILTC condition, as described below, when calling back to confirm demographics.</p> <p>If the link fails the NHS 111 health advisor will verbally pass the patient's details and conditions to a UC24 referral coordinator who will create a record for the patient.</p> <p>Do not ask the patient regarding their symptoms.</p> <p>Once the demographics have been confirmed please carry out a 'PDS' trace to confirm the patients NHS number. Inform the patient a call-back from a clinician will be within 20 or 60 minutes depending on the call priority.</p>	Urgent Care 24 Referral Coordinator												

	<p>If the patient informs they have an ILTC symptom such as 'chest pain' – the referral coordinator should select the ACPP algorithm. ACPP should not be used in any other instance.</p> <p>Accessible Information Standard (AIS) question should be asked and documented in the patient's record.</p> <p>Before ending the call use the following script:</p> <p>"Should your symptoms worsen whilst waiting for the call-back please contact us by calling NHS 111."</p> <p>Proceed to dispatch the call to the 'DCA' pool.</p>	
3	<p>The call will be triaged within the agreed 20 or 60 minute timeframes depending upon the 'DX' disposition.</p> <p>'DX' codes 94 and 118 do not apply to this service, these calls should not be dispatched and should be passed back to NHS 111.</p>	Urgent Care 24 Clinician
<p style="text-align: center;">PHASE 2 – 'Not Live'</p> <p style="text-align: center;">GUIDANCE: Patients in the Halton, Knowsley and Liverpool CCG area who originally dialled 999 for an emergency ambulance, and whose assessment with 999 identified that they are suitable for management without the need for an ambulance response.</p>		
4	<p>The call will be passed directly through a manual process, telephone referral from an Urgent Care Desk (UCD) clinician to the referral coordinator, who will create a manual incident record in the UC24 Adastra system.</p> <p>The UC24 Adastra incident number must be given to the referring member of NWAS staff and will be recorded in the NWAS incident for reference. All transferred calls will be made on recorded lines.</p>	NWAS Ambulance Control
5	<p>Answer 'Health Care Professional' telephone line with the following script:</p> <p>"Good morning / afternoon / evening, you are through to Urgent Care 24 and speaking to a referral coordinator. Can I take the contact number you are calling from? Can you confirm which service you are calling from?"</p> <p>The referral coordinator will continue to process the call in-line with 'Pathfinder' calls. The process can be found with the 'Calls from Healthcare Professionals' SOP OP102.</p>	Urgent Care 24 Referral Coordinator

	<p>In the relationship to caller field insert 'Ambulance' ensuring a log of the paramedic's PIN number, incident number and contact number is also recorded.</p> <p>Continue through to dispatching the call into the 'DCA' pool using the 'Pathfinder' case type with a 15 minute (urgent) priority. Do not use ACPP with the exception of 'death' where ACPP must be used.</p> <p>Ambulance Control – will have an incident number which must be logged – they will NOT have a pin number if the call is made from a health care professional that is not a paramedic.</p> <p>The caller must be advised to call our service back if there is any change or deterioration in the patient's condition prior to the call from a clinician.</p>	
PHASE 3 – 'Not Live'		
6	<p>Patients in the Halton, Knowsley & Liverpool CCG areas, who originally dialled NHS 111, and whose assessment using the NHS Pathways system was suggestive of the need for a lower acuity ambulance response for assessment and possible transport to hospital.</p> <p>This group of patients will be notified to UC24 through the same manual transfer process noted for 'Phase 2' patients.</p>	NHS 111
POST REFERRAL / PASS BACK PROCESS		
7	<p>Where a call has been originally passed to UC24, via either NHS 111 or 999, and the UC24 assessment suggests that an ambulance response is necessary, UC24 will make the call to NWAS via their normal emergency contact route.</p> <p>When the call is being made to NWAS, the UC24 clinician will detail the clinical outcome of their assessment and make it clear that the call has already been managed by NWAS. The original incident number should be logged, and notes entered in the call record to highlight that the call is a UC24 pass back.</p> <p>When a call is being passed back to NWAS in this way, but meets the normal criteria for a UCD intervention, NWAS will not seek to re-triage the call, instead they will proceed to deploy an ambulance response within the timeframe requested by the UC24 clinician.</p> <p>Calls may be referred back to UC24 after an ambulance response and face-to-face assessment, using the normal 'Pathfinder' referral route. It is important to ensure that when referring back to UC24, that</p>	Urgent Care 24 Clinician

	the reference number from the initial assessment is logged and referenced clearly in the patient record.	
ESCALATION PROCESS		
8	<p>In the unlikely event that there is a requirement to suspend the 'CAS' service this will be facilitated through the temporary closure of the service in the 'Directory of Services' (DoS).</p> <p>During 'Phase 2' if a suspension of 999, designated 'Green 3' and 'Green 4' calls is required, the OOH provider will inform NWS Ambulance Control and calls will be passed to the Urgent Care Desk (NWS CAS).</p> <p>PROCESS</p> <p>The provider will have internal processes which escalate a concern to the manager on-call / service lead. Please see appendix B.</p> <p>If after review of the situation the manager on-call / service lead makes a decision to request suspension of the service they will:</p> <ol style="list-style-type: none"> 1. Discuss the situation with the NHS 111 duty manager, and jointly review the risks. If a joint decision to suspend the service is made, the service will be closed on the DoS after 15 minutes to allow sufficient time for the NHS 111 duty manager to make NHS 111 staff aware 2. The UC24 management team will have a procedure to close and reopen the service in DoS 24/7. Please see appendix A. 3. UC24 and NWS will escalate within their organisation as per their own internal escalation procedures. Please refer to SOP OP225 'Director and Manager On-Call Procedure' 4. UC24 executive on-call will inform their CCG Urgent Care Commissioning Manager in-hours and the CCG on-call OOH 5. The situation will be reviewed jointly with NWS NHS 111 duty manager after 60 mins and a decision to continue taken. This will be reviewed hourly until reinstated <p>PLEASE NOTE – if the capacity status is updated to switch off the 'CAS' it will only last for 4 hours and then revert back to its original status. If the 'CAS' ever needs to be closed for more than 4 hours then page 4 of the attached document should be referred to and the opening times can be edited for a particular day. The date in question can be specified and the closed option can be selected.</p> <p>Once reinstated UC24 will:</p> <ol style="list-style-type: none"> 1. Contact the NHS 111 duty manager to advise the 'CAS' service is operational 2. Advise internally as per their own escalation procedures 3. Advise CCG commissioning manager on-call 	Urgent Care 24 Shift Manager or Service Lead / Manager On-Call / Executive On-Call / Head of Service

	4. Any calls transferred within this period will be passed back to NWAS to manage	
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STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title		Clinical Advice Service (CAS) – Out-of-Hours		Doc. No.	OP228
Version		V3			
Supersedes		All previous versions			
Approving Managers/Committee		Heads of Service			
Date Ratified		31.07.2017			
Department of Originator		Operations			
Responsible Executive Director		Director of Service Delivery			
Responsible Manager/Support		Head of Service			
Date Issued		31.07.2017			
Next Review Date		July 2019			
Target Audience		Operational and Clinical teams (In-Hours and Out-of-Hours), On-Call Managers / Executives			
Version	Date	Control Reason		Accountable Person for this Version	
V1	May 2017	Created for In-hours		Service Manager	
V2	July 2017	Reviewed and updated as required for OOHs service		Head of OOH / Director of Service Delivery	
V3	August 2017	Reviewed and updated as required		Head of OOH	
Reference documents		Electronic Locations		Locations for Hard Copies	
OP102 OP225		Urgent Care 24 Intranet		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 UC24 Intranet is the controlled copy. Any printed copies of the document are not controlled.					

Appendix A

Process for Turning the Directory of Service (DoS) Off and On

1. Please use the following link to take you to the DoS signing page:

<https://nww.pathwaysdos.nhs.uk/app/controllers/login/login.php?logout=true>

2. Sign in with your own username and password
3. You will see the below page:

Welcome Stacey Shields

My Services	My Saved Searches	Outstanding Approvals (0)	Outstanding User Requests (0)
<ul style="list-style-type: none"><input type="checkbox"/> OOH - Urgent Care 24 - Halton<input type="checkbox"/> OOH - Urgent Care 24 - Knowsley (Huyton, Halewood and Stockbridge Village)<input type="checkbox"/> OOH - Urgent Care 24 - Knowsley (Kirkby and Melling)<input type="checkbox"/> OOH - Urgent Care 24 - Liverpool<input type="checkbox"/> UC24 - APAS - Halton<input type="checkbox"/> UC24 - APAS - Halton - OOHs<input type="checkbox"/> UC24 - APAS - Knowsley<input type="checkbox"/> UC24 - APAS - Knowsley - OOHs<input type="checkbox"/> UC24 - APAS - Liverpool<input type="checkbox"/> UC24 - APAS - Liverpool - OOHs			

4. Select the relevant APAS service (DO NOT USE TO OOH ALL APAS CODES HAVE BEEN MAPPED UNDER THE 1 SERVICE PER CCG) and it will take you to the following page:

Demographic Details	Capacity Status	Clinical Details	Endpoint Details	Change History																
CONTACT DETAILS		OPENING TIMES																		
Address	Urgent Care 24 Liverpool L13 1FB	<table><tr><td>Monday</td><td>OPEN 24 HOURS</td></tr><tr><td>Tuesday</td><td>OPEN 24 HOURS</td></tr><tr><td>Wednesday</td><td>OPEN 24 HOURS</td></tr><tr><td>Thursday</td><td>OPEN 24 HOURS</td></tr><tr><td>Friday</td><td>OPEN 24 HOURS</td></tr><tr><td>Saturday</td><td>OPEN 24 HOURS</td></tr><tr><td>Sunday</td><td>OPEN 24 HOURS</td></tr><tr><td>Bank Holidays</td><td>OPEN 24 HOURS</td></tr></table>			Monday	OPEN 24 HOURS	Tuesday	OPEN 24 HOURS	Wednesday	OPEN 24 HOURS	Thursday	OPEN 24 HOURS	Friday	OPEN 24 HOURS	Saturday	OPEN 24 HOURS	Sunday	OPEN 24 HOURS	Bank Holidays	OPEN 24 HOURS
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Saturday	OPEN 24 HOURS																			
Sunday	OPEN 24 HOURS																			
Bank Holidays	OPEN 24 HOURS																			
Postal Locality	LIVERPOOL																			
Public Phone																				
Non-Public Phone																				
Fax																				
Email																				
Website	http://www.urgentcare24.com	PUBLIC HOLIDAY DATES																		
		<table><tr><td>25-12-2017</td><td>OPEN 24 HOURS</td></tr><tr><td>26-12-2017</td><td>OPEN 24 HOURS</td></tr></table>			25-12-2017	OPEN 24 HOURS	26-12-2017	OPEN 24 HOURS												
25-12-2017	OPEN 24 HOURS																			
26-12-2017	OPEN 24 HOURS																			
CALL HANDLER REFERRAL INSTRUCTIONS																				

5. Select Capacity Status Tab:

Demographic Details | **Capacity Status** | Clinical Details | Endpoint Details | Change History

Status: Green Amber Red

Last Updated: _____

By: _____

Notes:

[Capacity Grids:](#)

- To turn the DoS OFF please select Red – You MUST add notes as to why the DoS has been switched off, who has agreed this and expected de-escalation timescale.

Please ensure that an EMS update is completed demonstrating that we are escalating.

- To turn the DoS ON please select Green – You MUST add notes advising that we are de-escalating and who this has been agreed with.

Please ensure that an EMS update is completed demonstrating the service de-escalating.

Process for Amending the Directory of Service (DoS) **Opening Times**

- Click on the pencil icon next to the Opening Times.
- Click on the + sign in the day of the week you want to edit.
- If you want to include a meal break, then click the + sign again.
- Edit the timings as necessary.
- If a service is open during BH days (OOH Providers, etc.) then edit the BH times, this will associate the same times to all public (bank) holidays
- For specific days where a services opening hours are different to normal, select the specific Date & Time Exceptions, select the date from the calendar that displays and then enter the time. If the service is closed on that specific date, select the closed option.
- When all dates/times have been entered, select SAVE.

Edit Opening Times

Open All Hours:

Day	Session
Monday	08:00 18:30
Tuesday	08:00 18:30
Wednesday	08:00 18:30
Thursday	08:00 18:30
Friday	08:00 18:30
Saturday	

Service's General Public Holiday Opening Times

Add Session

Specific Date & Time Exceptions

Open

Closed

Add Session

Add day

Edit Opening Times

Open All Hours:

Day	Session
Monday	08:00 18:30
Tuesday	08:00 18:30
Wednesday	08:00 18:30
Thursday	08:00 18:30
Friday	08:00 18:30
Saturday	
Sunday	

Service's General Public Holiday Opening Times

09:00 17:00

Add Session

Specific Date & Time Exceptions

Open

Closed

August 2015

Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22

Appendix B

UC24 CAS Internal Escalation Process

If it has been identified that we are receiving high volumes of CAS referrals that we are unable to manage safely within capacity the decision may be made to temporally turn off the DoS for the CAS service.

In-Hours

1. Service Lead to collate data set – How many cases received/outstanding? Current capacity levels? Expected time for de-escalation?
2. Service Lead to escalate to the Head of Service/Service Manager.
3. Head of Service/Service Manager to escalate to Director of Service Delivery or appropriate deputy in their absence.
4. Director of Service to inform CCG's
5. Head of Service/Service Manager to contact the NWS Duty Manager.
6. Head of Service/Service Manager to turn off the DoS

Out-of-Hours

1. Shift Manager to collate data set – How many cases received/outstanding? Current capacity levels? Current EMS level? Expected timeframe for de-escalation?
2. Shift Manager to escalate to the Manager on Call Manager.
3. Manager on Call to escalate to Executive on Call.
4. Executive on Call to inform CCG on Call.
5. Manager on Call to contact the NWS Duty Manager.
6. Manager on Call to turn off the DoS.