

CLINICAL ASSESSMENT SERVICE BULLETIN NOVEMBER 2023 EDITION

At a glance

CAS Performance CAS SERVICE UPDATES Urgent Care Response teams Bolton ED Wigan Cases BaRs Update ARI Trafford





CAS PERFORMANCE

We are seeing an increase in cases closed with self-care advice and an increase in higher acuity outcomes, such as passed back for ambulance or advised ED. We appreciate at this time of year there is some higher acuity due to winter and seasonal respiratory illnesses etc but please consider if a hospital admission is actually required or whether we can use other appropriate services, such as Urgent care response teams, Urgent treatment centres or other community-based services to keep people out of hospital.

We are several of these services that you can book into via the UEC button or forward to the local Out of hours providers.

Here are some key considerations:

Booking ED slots

If the person does need to be seen in ED, please ensure you book an arrival time so the case can be followed up if they do not arrive. If a slot can't be booked, please add your reason in the consultation notes, for example patient needs to arrange transport and cannot state time of arrival.

It is important that we can demonstrate the value of the CAS service which means considering alternative outcomes to ED/ 999. Where clinically appropriate it is important you consider if the person can attend ED by their own transport or offer an NWAS taxi (if appropriate) as each ambulance we save can potentially help save a life as it means a quicker response for cat 1 and 2 ambulances.

IMPORTANCE OF BOOKING ED SLOTS SO PATIENTS APPEAR IN THE DNA QUEUE

Please ensure you book ED slots at all times when you have advised a patient to attend ED. This is important so cases can be followed up if they do not arrive and we can ensure appropriate actions are taken.

In cases where an ambulance has been requested or the case has been passed back to NWAS, please record in your notes whether alternative means of conveyance have been offered/ considered and the rationale for an ambulance.

Alternatives to ED

There are still some cases being referred to ED when we feel alternatives could have been considered. These include referring to other services, such as Out of Hours, Urgent treatment centres, Urgent care response services.



Out of hours services (OOHs)

Please utilise the Out of hours for cases that can be managed within primary care and that do not require any investigations. Remember you can forward cases directly to local providers Bardoc, Gtd, Mastercall, Salford. However, wherever possible, please use video consultations and prescribe using EPS. For example, symptoms of a UTI (as per NICE guidance), tonsillitis (using Fever pain score). This not only helps your fellow colleagues but also provides a better patient experience and removes unnecessary steps in a patient's journey.

<u>Wigan OOHs update</u>: Please note Wigan Out of Hours work on where the person is registered with a GP practice and not where the person lives.

Urgent Care response teams:

Urgent community response teams provide urgent care to people in their homes which helps to avoid hospital admissions and enable people to live independently for longer. Through these teams, older people and adults with complex health needs who urgently need care, can get fast access to a range of health and social care professionals within two hours. This includes access to physiotherapy and occupational therapy, medication prescribing and reviews, and help with staying well-fed and hydrated.

Below is a list of the UCRs across Greater Manchester:

Stockport 8am-10pm 7 days a week 0161 204 4777 Trafford 8am09.30pm 0300 3230303 (option 3) Central Manchester 08:30am-8.30pm 0161 529 6220 South Manchester 08:30-8.30pm 0300 303 9650 North Manchester 08:30am-8.30pm 0161 667 3292 Salford 08:00-7.30pm 0161 206 6666 Bury 08:00-6.30pm 0161 253 6292 Bolton 0800am-8pm 0161 763 8538 Wigan 08:00am-8pm 01942 481221 Tameside 08:00-6pm 0161 922 4257 Oldham 08:00-6.30pm 0161 770 6771

CAS SERVICE UPDATE:

Bolton ED has now been reinstated for GM CAS and 111 direct booking. You can access the appointments via the UEC button.

Salford ED has also been added to the UEC button



BARS UPDATE

The Booking and Referral Standard (BaRs) was re-launched on 28th October. Please note this only applies for certain green validation 999 cases. Please ensure you have completed the training before you use this.

If you are requiring an NWAS Taxi please select HPT4 and add in the free text if this would have been a Cat 3 or 4 ambulance as this can help NWAS in case of failed contacts. Otherwise please note all taxi requests are expected to respond within 1hr.



If you are requesting a Category 3 ambulance and you do not feel the person will need an interventions enroute to ED please consider if the person could be transported by a Urgent care service (UCS) ambulance or a Voluntary ambulance service. These ambulances support NWAS to transport patients from their home to an ED department but are not medically qualified so cannot provide medical interventions. Please free text in the adastra record '**suitable for UCS or VAS'** if appropriate as this can help NWAS prioritise the right ambulance crew. Please note this can apply to all cases so you can verbally say this for 111 or non-validated 999 cases.



SMART CARDS

Please ensure have working smart card assigned to GMA/service provider to use GP connects functions. It is important that <u>all</u> clinicians use their smart cards at all times when working on the CAS service as the smart card allows you to use EPS and GP connect. If you have any problems with your smart card, please contact your line manager or the IT team as soon as possible.

GP CONNECT

For in hours, please consider using GP connect wherever possible to directly book remote consultation slots with the person's registered GP practice.

However, if you feel the person requires an <u>urgent</u> GP appointment and you cannot <u>see</u> any slots available, please consider calling the GP rather than asking the patient to, as we are more likely to get a positive outcome for the person as we can clearly explain our clinical concerns.

For all routine or ongoing issues, it is appropriate for the person to be advised to ring their own GP.

If you have any issues accessing GP Connect e.g., identify a GP practice that never has slots available please let the CAS shift lead know at the time. Reminder to use GP connect appts first before calling only if really urgent?

ACUTE RESPIRATORY INFECTIONS/ SURGE HUB- TRAFFORD

Cas clinicians will have access to the Acute Respiratory Infection (ARI) & Primary Care Resilience (PCR/'Surge') Service delivered by Mastercall. Appointments will be available on a diary at Trafford General Hospital from 5th December 2023.

This is a GP only provision based at Trafford General Hospital between 05/12/23 and 31/03/23 for face-to-face appointments relating to ARI/Surge (Mon-Sun).

The clinic will be operational 10:00-22:00 Monday to Friday, 12:00-18:00 on a Saturday and 12:00-16:00 on a Sunday and bank holidays.

ARI Inclusion criteria:

Adults and children with acute respiratory symptoms, most likely due to infection (e.g. bacterial or viral infections including COVID-19, RSV, influenza), who have been identified as requiring face-to-face assessment but not requiring hospitalisation.

Exclusion criteria:

- Premature (born <32weeks aged <9m)
- Violent or vexatious patients
- Routine chronic disease management
- Alcohol and substance abuse cases
- Ongoing mental health issues
- Repeat Medication
- Palliative Care



• Complex Mental health

• Death certification and EOL (unless altered by CCG request for Palliative Care Pack and ECDSS referral support).

- Routine appointments (unless 'same day' required)
- Chest Pain/Tightness with radiation to Neck, Jaw or Left Arm
- Sudden onset of breathlessness/unable to complete a sentence/wheeze at rest
- Febrile child with rapidly spreading non blanching rash/neck stiffness/floppy

PCR Inclusion Criteria

Adults and children with acute primary care symptoms, who have been identified as requiring face-to-face assessment but not requiring hospitalisation.

PCR Exclusion Criteria

Chest pain, Difficulty breathing, Unable to complete a sentence, new onset confusion, trauma, head injury, FAST symptoms, loss of consciousness, severe allergic reaction, sudden onset of severe headache, rapidly spreading nonblanching rash, floppy child, severe abdominal pain, mental health/overdose, uncontrollable bleeding, constantly crying/screaming child, diabetic patients with BS>20, Insulin diabetic patients with diarrhoea and vomiting.

We will keep you updated if we have any more ARI hubs that we can book into.

PACCS

If you have not completed the Paccs training, please do so asap. If you have any issues please contact Vikki Farrington <u>victoria.farrington@nhs.net</u> or Rachael Ingram <u>rachaelingram@nhs.net</u>

NEXT EDUCATIONAL EVENTS:

NWAS site visit/ teams meeting as next educational event. Please note we are finalising details. 24th January Managing back pain cases 6.30pm-8pm

We hope you have found this bulletin useful. If you have any suggestions for future topics for bulletins or training events, please contact Rachael Ingram <u>rachaelingram@nhs.net</u>