

14th March 2024

ATTENTION! BOOKING AND REFERRAL SCHEME (BaRs) Update

We have made some changes to BaRs. It is important that all CAS clinicians are aware of these as these developments have been made for safer transfer of cases between NWS and Cas and vice versa.

We have now changed these cases:

Validation Request

to

BARS Validation

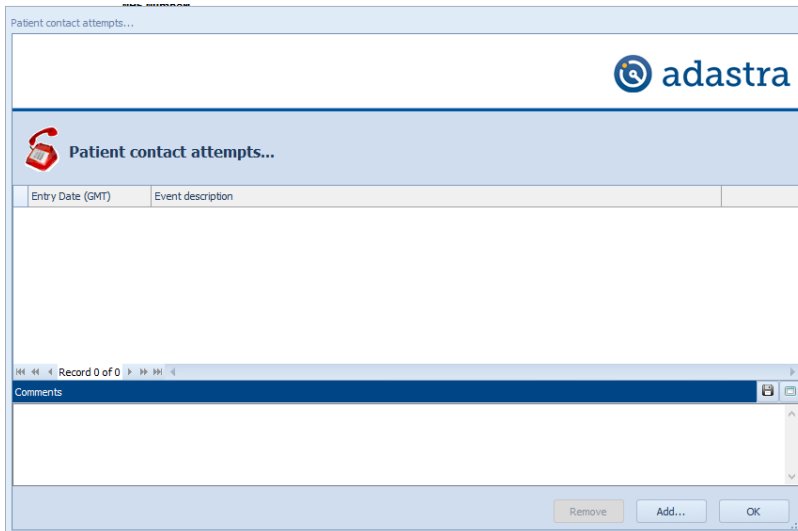
To avoid confusion as these are Bars cases.

From 29th February if you have a failed contact do not write in the patient records and then update the record as this incorrectly sends a message to NWS that CAS are dealing with the case. We have included this pop-up alert to remind clinicians not to do this.

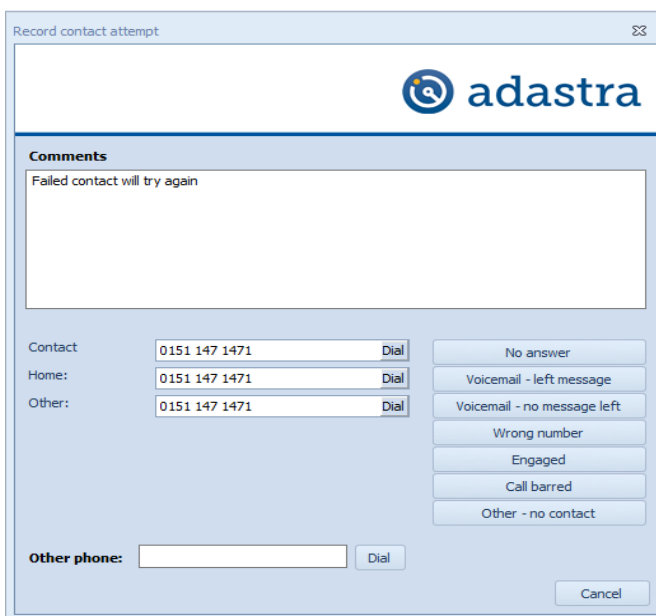
Please note these changes will affect all BaRs cases (GM and Out of area).



For failed contacts you should record this on the **patient details screen**. Choose the number(s) you have tried.



Then select the outcome, for example voicemail left.



This will record the failed contacts. If 3 failed contacts, then please follow the 3 failed contacts procedure and pass back BaRs cases back to NWAS with the priority unchanged.

If passing the case back to NWAS via BaRs you should not need to contact the CAS coordinator or HCP line as these cases have been passed electronically. In rare occasions if you have a query then please speak to them via the HCP line.

Ensure you explore other means of transport where clinically appropriate. Consider NWAS taxi (HP4T) or record VAS (voluntary ambulance) may be suitable if you do not feel any medical intervention is required during conveyance to ED.

REMEMBER categories of ambulance

CAT 1: life threatening emergencies/ there is an immediate threat to life such as cardiac arrest, patient is not breathing

CAT 2: stroke, non-stop heavy bleeding, seizures, DKA

CAT 3: abdominal pain

CAT 4: non urgent cases

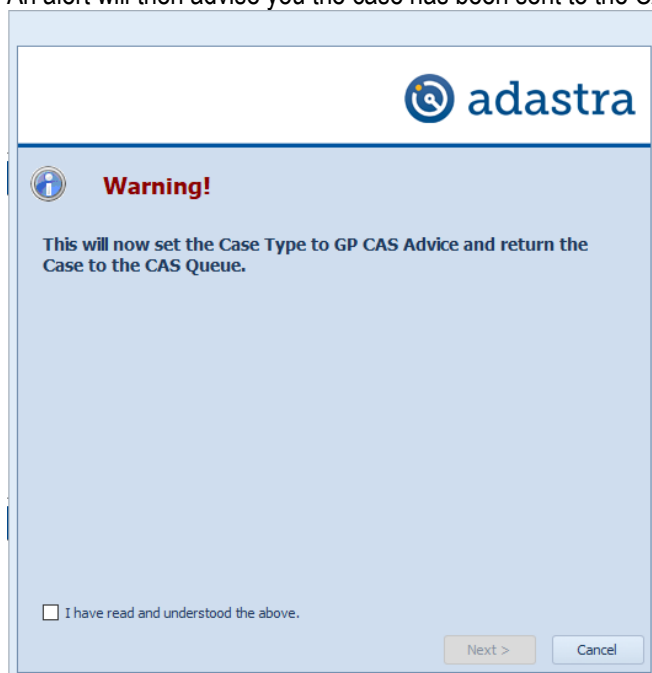
Do not upgrade cases unless clinically indicated. Do not upgrade due to waiting times. Please note we are auditing upgrades to ensure we are not compromising other cat 2 cases.

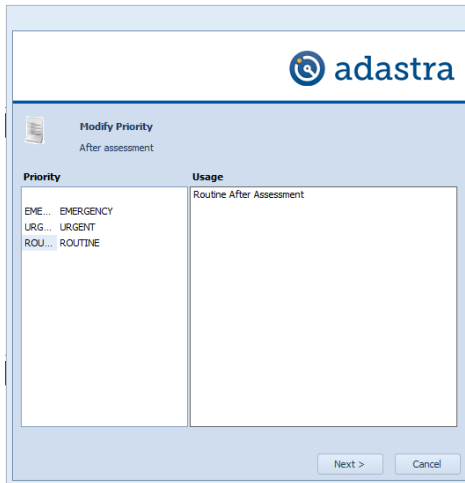
The next changes come into effect 14th March

If you want to send the case for GP advice select the GP Advice button on the right-hand side, this will now take you through the process to send the final response for BARs back as you have decided to send for GP Advice so the final response is CAS closure.

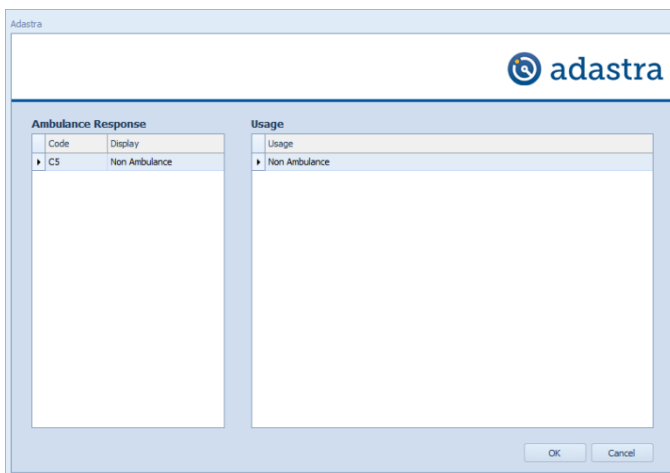


An alert will then advise you the case has been sent to the CAS queue for GP CAS Advice. Tick you understand.





For non-ambulance cases we have now created a default C5 to avoid cases being sent back to NWAS incorrectly with a different category.

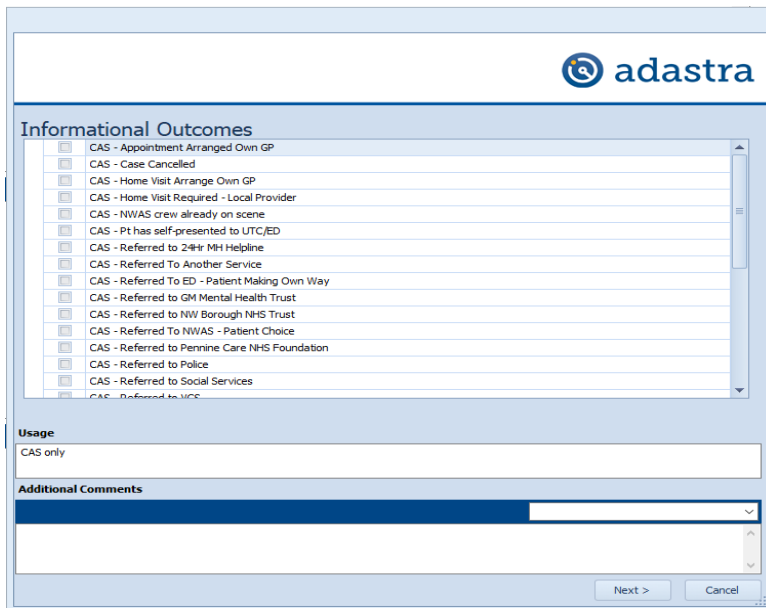


An alert will then appear and click ok



NWAS will then receive a notification that an ambulance is not required, and that CAS are dealing with case and will close the case of their system.

Please ensure you select the correct outcome as some clinicians have used 'referred to ED' when they have 'referred to UTC'. Please note we have also added 'referred to UCR'. Please ensure you use the correct outcome to ensure we have accurate referral data.



REQUIRES AMBULANCE AFTER NEXT ASSESSMENT

If after subsequent triage it is felt the patient **does** require an ambulance, (for example deterioration in condition) you will not be able to send the case back via BaRs as it will have been removed from the system.

An alert will appear as below



A new ambulance request will need to be created. Please contact the HCP line on **0345 140 0144** and advise on the category of ambulance response as you would do for all non-BaRs validation cases.

If you have any issues or require any additional training, please contact your CAS service lead in the first instance.

Kind regards

Rachael Ingram (UEC Programme lead and Clinical Safety Officer).