

Module 3

CALL HANDLING

Training Manual

Name of Staff Member _____

Date of Training: _____

TL/Trainers Name: _____

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1 How to answer a call

Callers using the service may be distressed, anxious, worried, elderly or infirm.

Callers also may not be experienced in calling for out-of-hours assistance, and so may not be ready to give us the information we require.

All colleagues working at Badger have the right to be spoken to with respect; however, please bear in mind all of the above factors when call handling. We ask that you be polite and professional at all times by being calm, patient and empathetic.

Please guide the caller through the service offering the care and concern necessary.

At times, the caller may be offering you superfluous information, or be giving you information in the wrong order that you will need. It is important that, whilst still being polite and professional you take **control of the call** – this will minimise delay in getting the patient the care that they need.

Call Script for receiving calls

“Can I confirm the name of the Surgery?”

“May I take the Patient’s Doctor’s name please.”

“Are you the Patient or are you calling for someone else?”

If they are calling for someone else, ASK **“Are you with the Patient?”**

THE PATIENT MUST BE AWARE OF THE CALL, if not then politely inform the caller to ask the patient to ring in themselves if they need the OOHs or call back once the patient is aware.

“I am just going to take some details:

Patient’s date of Birth

Patients Contact Number”

PROMPT SEARCH

Ask for the Patient’s Name

IF THE PATIENT IS ALREADY WITHIN OUR DATABASE, ask Patient/Caller to **confirm the postcode, first line of address and area BACK TO YOU**. This is to make sure we have the correct patient/details, then select OK to continue. **IF NOT ON THE DATABASE, select NEW and Continue**

FOR ALL ADDRESSES – the area MUST be on the 4th line

“Can I take the Patients Home telephone number?”

“Can I take the Patient’s Home Postcode?”

“Could you confirm the first line of the patient’s address?”

“What Area is that?” (FOURTH LINE) – “Is the Patient at home?”

If at Home continue to relationship to caller / If not record address in current location and contact number

Ask for the Callers name and relationship/ job role to the patient (THIS SHOULD HAVE BEEN ESTABLISHED AT THE START OF THE CALL)

“Can I take the reason for the call today?”

“How long has this been for?” (Hours, days, weeks – inadequate to write a ‘bit/a while’)

“Has the patient taken anything for these symptoms?”

“Does the patient have any previous medical history?” (Write down exactly what the health issues are – note: lots of health problems is unacceptable)

“Does the patient take any regular medication?” (Ask how many meds patient is on. If 1-4 items write them down and if names not known write down what they are for. If 5 or more write down how many e.g. “7 meds”. If not known write down “more than 4 meds, number n/k)

“Has the patient contacted their own GP Practice/Surgery?” (Yes/No)

“Does the patient live on their own?” (Must be recorded for everyone over 16 years old)

“Is there anything else you want to tell me?”

Please ensure that you record information on case notes eg: (Sore Throat, 2days, Paracetamol PMH: None, Reg Meds: None, No GP contact; Lives Alone; No other info)

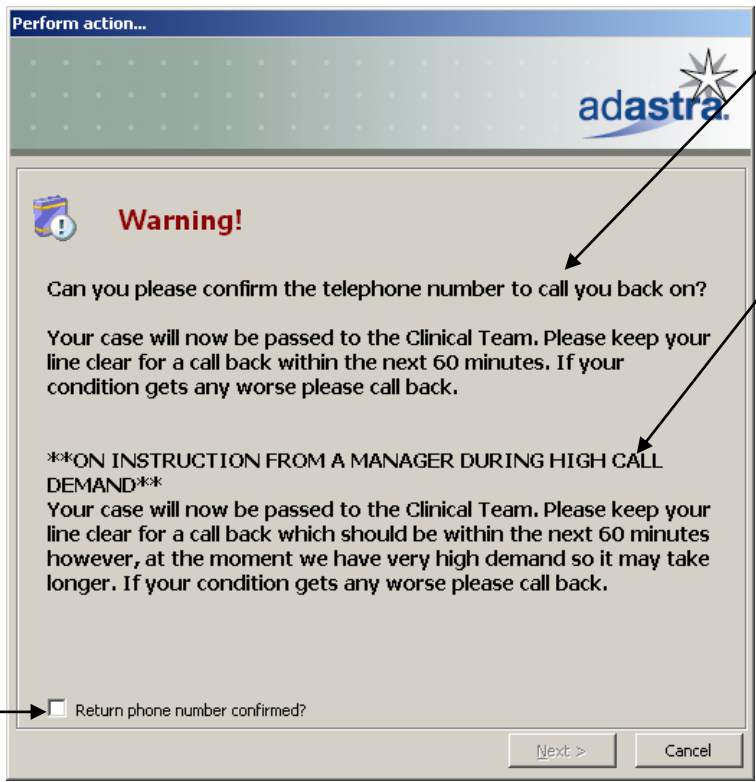
CLOSING THE CALL

Ask the Patient/Caller to confirm back to you the phone number that will be used to call them back.

“Your case will now be passed to the Clinical Team. Please keep your line clear for a call back within the next 60 minutes. If your condition gets any worse please call back.”

Note:

Do not tell the caller that the doctor will call-back as it may be a despatcher calling the patient back, advising them to attend a treatment centre or another to contact another agency, e.g. 999, A & E, Walk-in Centre, etc.



Before ending the call **always** read this statement.

Only to be used when instructed by the Team leader.

When the caller has confirmed the number back to you tick 'Return phone number confirmed?.'

2 Call Priorities

It is vital that guidelines which have been put into place by the Medical Director are adhered to; they are in place to meet the Department of Health Quality Requirements. More importantly it is imperative that patients receive the most appropriate treatment: in emergencies every second counts.

There are four call priorities:

- Emergency
- Urgent
- Routine
- A&A

EMERGENCY (Patient advised 999)

- Severe chest pain
- Severe breathlessness
- Severe or uncontrollable bleeding
- Loss or reduction of consciousness including ongoing fit/seizure
- Collapse with paralysis or extreme weakness
- Patients who should attend the A&E department without delay but are unable to use other transport, for example due to immobility, lower limb injury, conditions where driving is inadvisable
- Imminent childbirth
- Intolerable pain where the patient is unable to wait for a face-to-face consultation within an hour.

URGENT (Call back within 20 minutes)

- Child with any 2 of the following
 - Fever/ Rash/ Drowsiness
- Patient who is breathless or wheezy
- Severe pain
- Fit or seizure - now stopped
- Sudden loss of vision, hearing, speech or ability to move a limb
- Others where a receptionist considers an urgent response is required (the reason for prioritising a call as urgent **must** be stated in the comments box.)

ROUTINE (Call back within 60 minutes)

All other calls

A&E (Advise patients with any of the following to attend A&E)

- Overdose
- Any form of trauma:
 - head injury;
 - possible fracture;
 - dislocated joints;
 - inability to weight bear;
 - self inflicted injury;
 - skin or tissue injury;
 - burn other than extremely minor requiring no treatment.
- Falls
- Possible strokes
- Assault
- Urinary retention where community services are not available
- Road traffic accident
- Foreign body in any orifice or under the skin
- Inhalation or accidental poisoning with toxic substances
- Sudden loss of vision in either eye

Prison Calls

For prison calls, NEVER advise 999 OR A&E.

In some cases patients may not want to call 999, or attend A&E; if this is the case ensure in the comments box you record 'pt declined ____.' Where this is the case prioritise the call as urgent and store the call in the usual manner, the call will now go into case streaming.

Never inform the patient the priority you have given the case, as the clinician will reassess the case once it goes into streaming, in some cases you may feel that the case is urgent but a clinician may decide that it is a routine call and downgrade the original priority set or vice versa. Furthermore the script for finishing a call **always** remains the same.

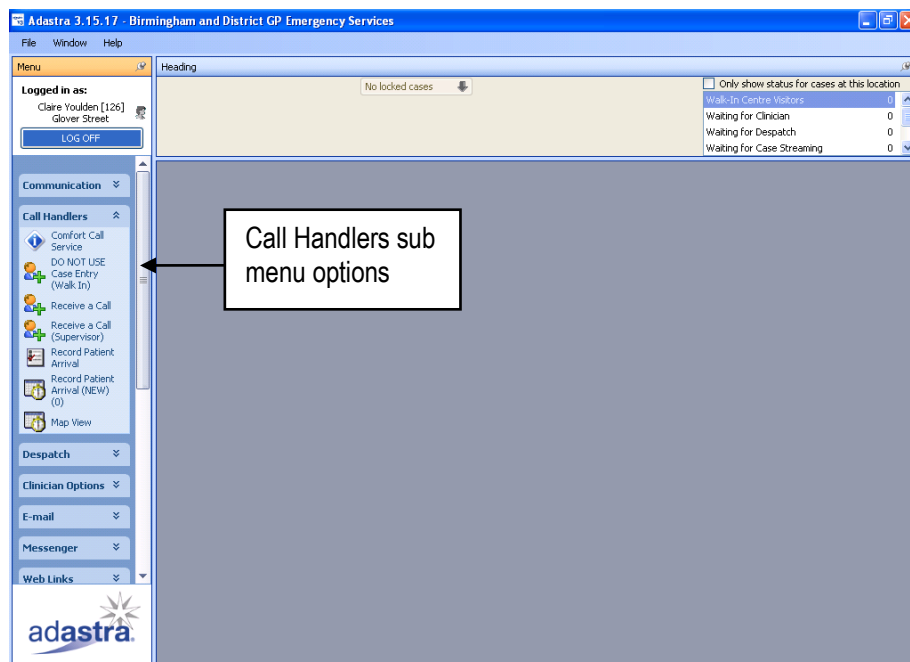
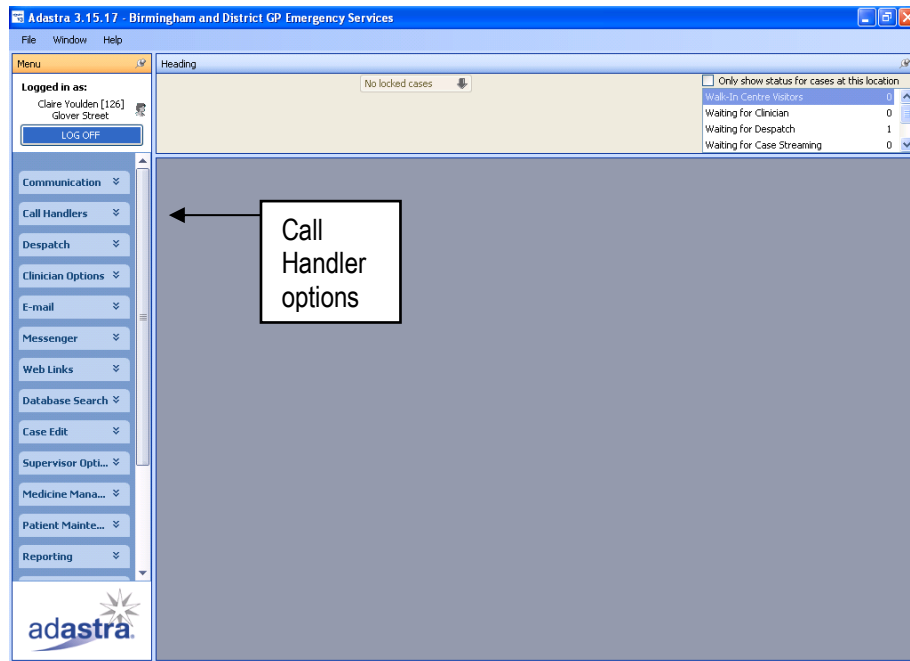
As BADGER provides an out of hours GP service, clinicians are unable to aide any patients that present with dental problems; this includes problems with the teeth and dental abscesses. If you are unsure whether a problem is dental in origin the call should be passed for assessment by a clinician. Patients should be advised they need to contact NHS 111 who can provide details of out of hours dental services in the patient's area. If a dental call has been taken, it needs to be completed as 'Reception Advice' then select 'Advised to contact Dentist.' At this point you can record any other details you feel necessary in the additional comments box.

3 Call Taking

In this section, you will be shown how to take the different types of calls. The trainers will go through the basics of call taking and discuss with you the variations in calls that you may typically experience. Inevitably, as soon as you work independently, there will be many situations that arise that you have not previously experienced, so always check with the Team Leader if you are unsure.

Basic Badger Call: Patient at home address

When you have logged on to Adastra you will see the main menu screen as shown below.



Call Handlers sub menu screen

Select the option 'Receive a call' by clicking on it; the patient demographics screen is displayed as shown below.

Recording the patient's demographic details

The screenshot shows the 'Adastra 3.15.17 - Birmingham and District GP Emergency Services' window. The 'Receive a Call' tab is active, displaying the 'Demographics' section. The interface includes a search bar, fields for initials, forename, surname, sex, DOB, and age. There are also sections for contact information (Home, Mobile, Other, Cur. Loc, Return Phone), a 'Caller' section with checkboxes for 'Caller is patient?', 'Walk-in patient', and 'Test entry', and a 'Doctor' section with dropdowns for 'Registered' and 'Primary' status, and search fields for 'Area', 'Doctor', and 'Surgery'.

Receive a Call, Demographics Screen

Case Entry Demographics Screen

This screenshot highlights three specific fields on the 'Receive a Call' screen with callouts:

- 1** Pt own Doctor/Surgery field- enter doctor: Points to the 'Doctor' search field in the 'Doctor' section.
- 2** General Search field: enter patients Date of Birth: Points to the 'Search' field at the top of the 'Demographics' section.
- 3** Patient's Home Telephone Number: Points to the 'Home' telephone number field in the 'Contact' section.

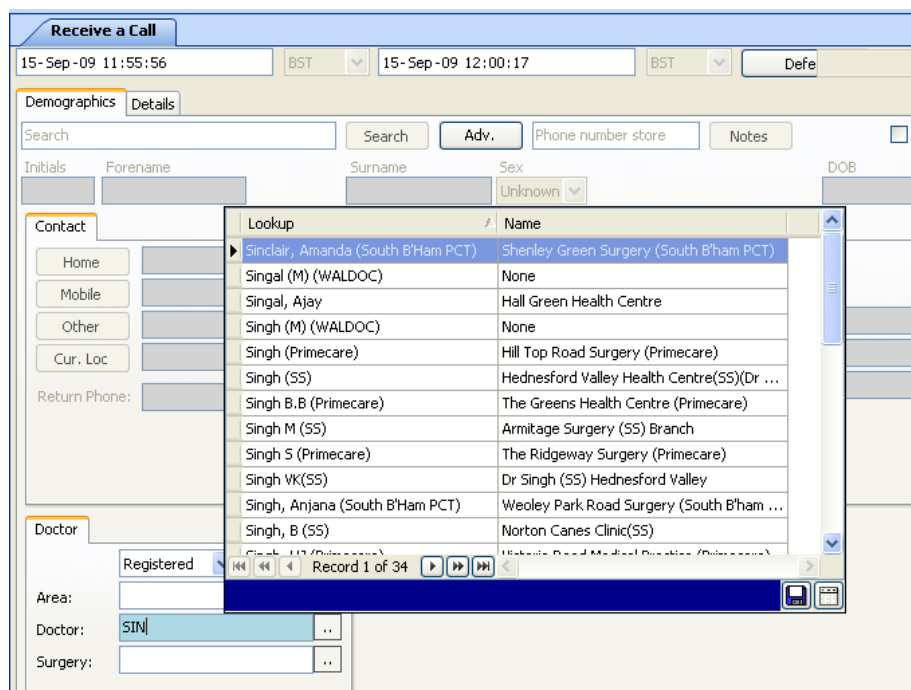
Adastra defaults to the main search field use your tab key or mouse to move the highlight to the *Doctor* field.

Ask the caller for the **PATIENT'S** own doctor's name; it is imperative at this stage that you confirm that you are taking the patient's details and not the callers.

Enter the first 3 characters of the doctor's name and a list of doctors' names that match will be displayed. Double click on the doctor to select and populate the doctor field.

Selecting a Doctor

Adastra will match the doctor to the surgery, in some cases there may be more than one doctor with the same surname listed.



Lookup	Name
Singal, Amanda (South B'Ham PCT)	Shenley Green Surgery (South B'Ham PCT)
Singal (M) (WALDOC)	None
Singal, Ajay	Hall Green Health Centre
Singh (M) (WALDOC)	None
Singh (Primecare)	Hill Top Road Surgery (Primecare)
Singh (SS)	Hednesford Valley Health Centre(SS)(Dr ...
Singh B.B (Primecare)	The Greens Health Centre (Primecare)
Singh M (SS)	Armitage Surgery (SS) Branch
Singh S (Primecare)	The Ridgeway Surgery (Primecare)
Singh WK(SS)	Dr Singh (SS) Hednesford Valley
Singh, Anjana (South B'Ham PCT)	Weoley Park Road Surgery (South B'ham ...
Singh, B (SS)	Norton Canes Clinic(SS)

Selecting a Doctor – Similar Names

Always ask the patient to confirm the specific surgery name

It is vitally important that the correct Doctor is matched to their patient, as details you record need to be sent to the correct Surgery. If an *incorrect* Doctor is recorded this may result in a delay reaching the Surgery and to the patient's follow-up care with their own GP

In some cases, the patient may not know the name of their doctor or may advise you of a doctor not listed on the database, e.g. a locum doctor or a registrar who is covering at the surgery.

In this situation you can do the following to determine the patient's GP

Ask the patient for the name of the surgery and carry out a search based on the surgery name field.

Ask the patient for the name of another doctor at the surgery.

Ask the patient the surgery telephone number and enter this in the surgery field, you must enter the full number including the STD code, e.g. 0121 693 4000

If you are unable to establish the patient's GP request the assistance of the Team Leader or Team Leaders assistant.

Note:

We only take calls from Badger Member surgeries and other calls should be advised to call 111.

Badger Member surgeries will have **BM** next to their name in the provider details.

Badger **does** take these calls.

Checking Surgery Timeline

In the 'Surgery Timeline' you will find a number of instructions for each individual surgery; including hours of opening and various other instructions.

When you enter details into the own doctor field, and it is a surgery that qualifies for Badger cover - the coverage details for this surgery will be shown in the bottom section of the screen.

This information also determines if we cover the calls at the time that the call is being taken. The timeline at the bottom of the screen indicates if the surgery is open or closed. Check the timeline to determine if it is appropriate for us to take the call.

If a surgery shows as being open you would not process the call and instead ask the caller to contact their surgery.



Surgery Open

At other times, where the surgery shows as being closed (as below), and this is a surgery we are contracted to provide out-of-hours care to, you will process the call as normal:



Surgery OOH

Some surgeries have alternative instructions; this can include passing the call back to the Surgery or directly to a specific GP:



Surgery with alternative instructions

If the patient's surgery is covered by Primecare the caller should be advised to call their Surgery and listen to the answer machine message. The message will inform the Patient what to do during the out-of-hours period:



Primecare Calls

Please Note: There may be some occasions when the cover indicates that the surgery is open, if this happens during the OOHs period check with the Team Leader for instructions on how to deal with the call

Searching for an existing patient record

Once you have confirmed that the patient qualifies for cover by Badger continue to take the patient details by entering information in the search field to see if the patient has used the service previously and their record is stored on the database.

The screenshot shows the 'Receive a Call' interface. At the top, there are time and location fields (12-Jul-12 15:16:12 BST, 12-Jul-12 15:17:04 BST) and a 'Defer' button. Below this is the 'Demographics' tab, which contains a search bar with the number '010119' and a 'Search' button. To the right of the search bar is an 'Adv.' button with the number '01283500800'. Below the search bar are fields for 'Initials', 'Forename*', 'Surname*', 'Sex*', 'DOB', and 'Age*'. The 'Contact' section includes 'Home:', 'Mobile:', 'Other:', 'Cur. Loc.', and 'Return Phone:*' fields. The 'Home' section includes 'Home', 'Current Location', and 'Postcode' fields. The 'Caller' section includes a 'Caller is patient?' checkbox, 'Name:', 'Relationship:*', and 'Contact Phone:' fields. The 'Doctor' section includes a 'District Nurse' tab, a 'Registered' dropdown, a 'Primary' checkbox, and search fields for 'Area:', 'Doctor:', and 'Surgery:*'. The 'Surgery:*' field is populated with 'L PRACTICE-BRANSTON (SS)'. At the bottom, there is a calendar view showing 'Thursday 12-Jul-12 14:00:00 - Thursday 12-Jul-12 17:59:59 Full Cover' with a red arrow pointing to the 15th of the month.

Search the Patients DOB

Patient's Home Telephone Number

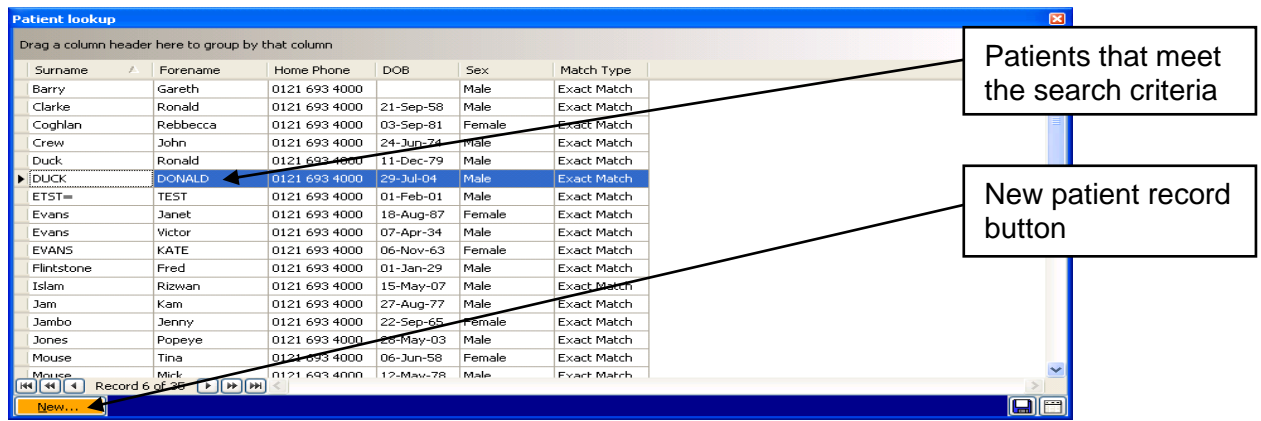
Completed own doctor field

Surgery timeline

Demographics screen with own doctor and search criteria fields completed

Search criteria: Enter the patient's **Date of Birth and Telephone Number**.

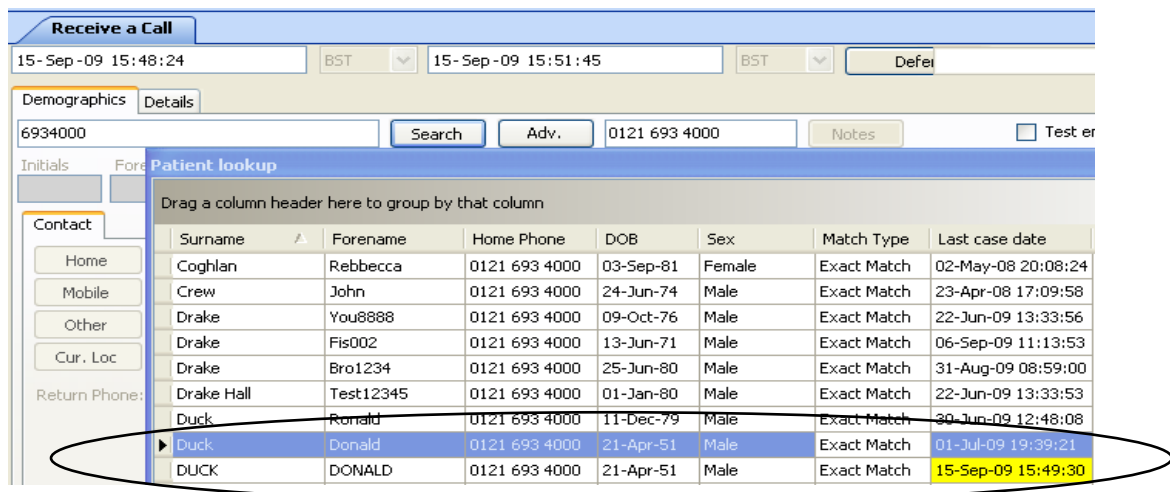
Ask for the patient's name, if the patient's details are shown in the list select them by moving the cursor to highlight the details and press enter, the patient's record will be displayed on the demographics screen, If not move the cursor to the **NEW** button in the bottom left hand corner and click on the selection



Patients that meet the search criteria

Important

Do not create new records for existing patients as this creates duplicate entries on the database and the Clinician may not see all of the patient's previous history when looking at previous encounter, duplicate records have to be merged into a single record later by the Team Leader or the admin team.



Duplicate patient example

Case entry – New patient record

If the patient details are not stored on the database, you will be presented with the blank patient record, displaying only the patient's dob, doctors name and their contact telephone number as shown below.

The screenshot shows a software interface for 'iam and District GP Emergency Services'. The main window is titled 'Receive a Call' and displays a patient record. The patient's details include: DOB: 01-Jan-1919, Age: 93 years. The form has several sections: 'Demographics' with fields for Initials, Forename, Surname, Sex, DOB, and Age; 'Contact' with fields for Home, Mobile, Other, Cur. Loc, and Return Phone (01283 500800); 'Home/Current Location' with fields for Address, Postcode, and Country (United Kingdom); and 'Caller' with fields for Name, Relationship, and Contact Phone (01283 500800). Below these fields, there is a 'Doctor' section with a dropdown menu set to 'District/Nurse', a 'Registered' checkbox, and a 'Primary' checkbox. The 'Area' field is empty, and the 'Doctor' field is 'JONES, P J (SS)'. The 'Surgery' field is 'AL PRACTICE-BRANSTON (SS)'. At the bottom of the form, there is a calendar view showing the current date as Thursday 12-Jul-12 14:00:00 to Thursday 12-Jul-12 17:59:59 Full Cover.

Blank patient record

For new patients using the service continue to enter the patient demographic details as follows, you can use the tab button or the mouse to move between fields

Telephone Number: enter patient's home phone number. You do not have to include the area code (e.g. 0121). If a patient offers a mobile number **always** ask if there is a landline number in addition, (sometimes it is not always possible to get through to a mobile due to a bad signal).

Forename: enter the patient's first name only not the full name, any middle-hyphenated names can also be entered in this field

Ask the patient to confirm the spelling

Surname: enter the patient's surname only and not the full name.

Gender: in most cases Adastra will recognise the gender of the patient, if not then select male or female by entering M,

F or using the drop-down arrow and selecting from the list.

Some names can belong to either gender, where it is not immediately obvious, **ask the patient to confirm their gender.**

Patient's date of birth

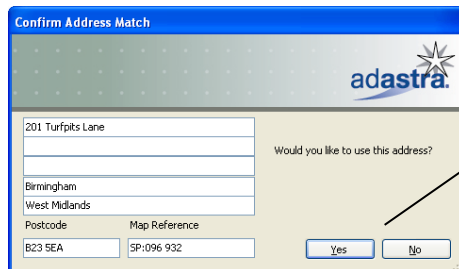
Enter the patient's date of birth; always enter a zero before a single digit.

e.g. for 6th April 2007 enter 060407

Adastra automatically fills the patient's age in the age field.

Postcode:

Enter the patient's postcode details, Adastra will prompt you for the house number for the post code, select this and the address will be automatically completed. If the postcode is unknown then the road name can be entered in the first field and City or Town in the second and then click [.] this will then produce an address that matches with the postcode given.



If the address is correct click **yes**, if incorrect click **no**

Confirm with the caller that you have taken correct details, if you are still unable to attain the postcode you will have to enter what details you do have.

IMPORTANT – Data Protection

Do not read any patient details back to the caller; instead ask them to confirm their details to you

IMPORTANT

By default, Adastra populates the district on line 2, however, this does not show correctly to drivers and on other areas of Adastra; therefore you must **always** copy and paste the district into the 4th line of the address field.

You should now enter the call origin details; these are recorded under the **Caller tab.**

Caller is patient?

Click on this if the caller is the patient, a tick will appear in the box and the remaining fields will be greyed out

Caller is not the patient

If the caller is not the patient, enter the following information:

Name:

enter the caller's name; this may be a relative/friend, a Health Care Professional, etc

Relationship:

by clicking on the lookup field Adastra will display a list of call origins, select the appropriate origin from the list.

Contact Phone:

enter the caller's telephone contact number and where appropriate an extension number.

The screenshot shows the Adastra 3.12.27 software interface for Birmingham and District GP Emergency Services. The main window displays a 'Case entry' form with the following details:

- Case entry:** 07-Jun-08 12:25:23 BST, 07-Jun-08 12:27:35 BST, Defer, << New contact >>
- Demographics:** Initials: T, Forename: Test, Surname: Call, Sex: Male, DOB: 06-May-1958, Age: 50 years.
- Contact:** Home: 0121 779 2852, Mobile: , Other: , Cur. Loc: , Return Phone: 0121 779 2852, Caller ID: .
- Home/Current Location:** 158 Mackadown Lane, Tile Cross, Birmingham, West Midlands, Postcode: B33 0JE, SP:158 862, United Kingdom.
- Doctor:** Registered: , Primary: , Area: , Doctor: Edwards, Gerwyn (BEN PCT), Surgery: Church Rd Branch Surg-Sheldon (t).
- Caller:** Caller is patient?, Name: , Relationship: , Contact Phone: , Walk-in patient.

The interface also shows a sidebar with 'Call Handlers' and 'Despatch' options, and a status bar at the bottom indicating 'Friday 06-Jun-08 18:30:00 - Monday 09-Jun-08 07:59:59 Full Cover'. A system message box in the bottom right corner states 'You have new unread electronic mail'.

Completed demographics screen for case entry

Entering the patient's current condition.

To move to the patient's current condition screen, you can either use the mouse to select the details tab or use the Adastra hot key **F10**. To go back to a previous screen, you can use the Adastra hot key **F9**.

The details screen is displayed as shown below.

The screenshot shows a software interface for entering patient details. At the top, there are date and time fields: '25-Feb-10 11:00:28' and '25-Feb-10 12:03:01', both with 'GMT' dropdowns. A 'Defer' button is next to the second time field. To the right is a '0 last week' dropdown. Below this is a 'Demographics' tab and a 'Details' tab. The patient name is 'T Test Test -- 04-May-25 (84 years) 0121 693 4000'. A 'Notes' button is to the right. The 'Symptoms' field is highlighted in blue, and a dropdown menu is open, listing various medical conditions such as 'Abdominal (Abdo) pain', 'Abnormalities', 'Abrasion', 'Abscess', 'Acites', 'Acute exacerbation of Asthma', 'Acute Otitis Media', 'Acute Otitis Media Bilateral', 'Acute Pyelitis Bilateral', 'Acute Tonsillitis', 'Acute Torticollis', 'Acute Tracheo Bronchitis', 'Adenectomy', and 'Allergic Reaction'. Below the dropdown is a 'Multiple case' checkbox. To the right of the dropdown are buttons for '999', 'Store Call TC', 'Amalgamate', and 'Sensitive'.

Frequently used symptoms field selector or use free text

F2 will open and close the drop-down list

In the symptoms field a brief description of the patient's current condition should be recorded. Descriptions should be brief, concise, clear and appropriate for anyone to understand and should include the following:

- What is the reason for the call today?
- How long have they had it/when did it start?
- Are they taking anything for it - brief information, if lots of medication, don't take details as clinician will have to check anyway?
- Or any other medication, Yes/No – don't take details unless patient volunteers details as clinician will have to check anyway?
- Do they have any other medical problems?
- Has the patient consulted their own doctor (if yes, when? Result?)

Example: Vomiting for 2 days, paracetamol taken, Asthmatic , blue inhaler, not seen own GP.

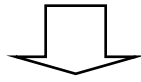
Important

It is important to record accurate details at this stage to enable the case streaming doctor to carry out an accurate clinical assessment of the patient's case.

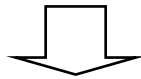
You can click on the drop down arrow to look up the majority of common complaints, this is particularly useful with difficult to spell conditions, or alternatively use the Adastra hot key **[F2]** to open a list of common symptoms.

As an aid to controlling the call, a call-flow of this has been created:

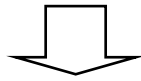
What's Wrong?



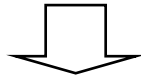
How Long?



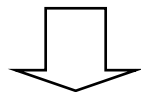
Any Meds taken?



Any Medical History?



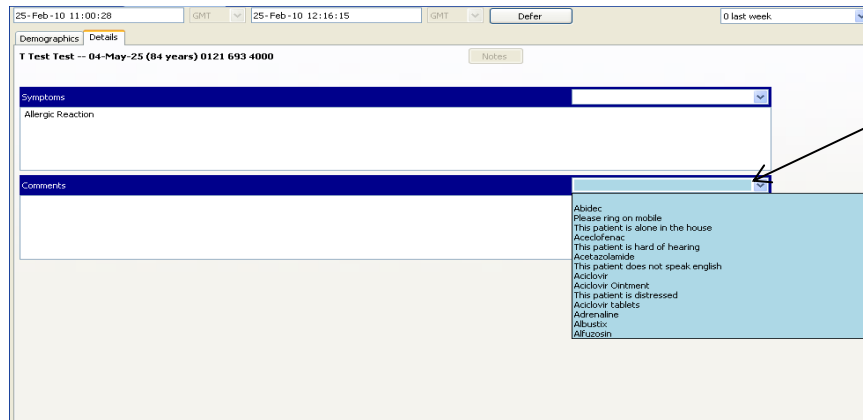
Any Reg Meds?



Consulted own GP?

Entering any relevant comments

In the next field you can record any **comments** or information that may assist in the way that the call is managed; again a drop down selector is available for frequently used comments as shown below; these comments are listed in the call summary section of the Clinicians record i.e. key safe number.



Frequently used comments look up list

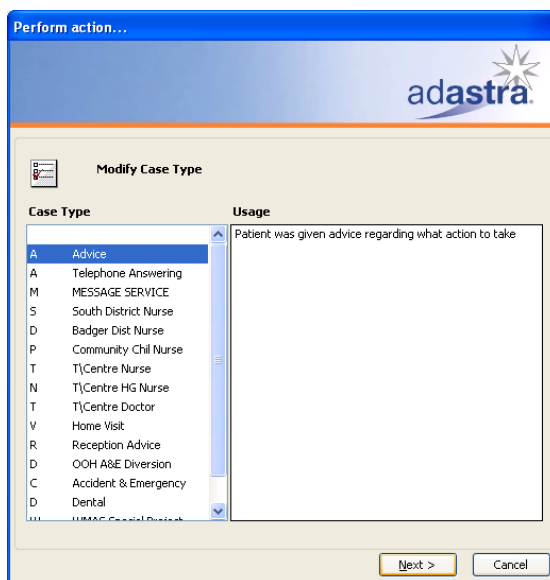
F2 will open and close the drop-down list

Detail screen completing case entry

You have now completed the record entry and must pass the call to the clinicians; to do this move the cursor to the store call button on the right hand side of the screen and select it by clicking on it with the left hand mouse button or alternatively use the Adastra hot key **[F10]**

If you have correctly entered all of the required information Adastra will move to the next stage. If mandatory information has been omitted from the record Adastra will display a warning message informing you of the missing information.

Adastra will display the case type selection box as shown below.



Case type determines the clinician or service that the call is for, the majority of the Badger calls will be for advice. Move the cursor to highlight the **Advice** option; the other options will be explained to you during your training in later modules. For

the basic call accept the default of **Advice** and press enter to confirm.

In the example shown **Advice** has been selected and a comment automatically entered in the usage field.

Adastra moves to the **Modify Priority** screen, as shown below.

The modify priority screen enables you to select the correct priority for the call at the time that the call is received as explained in section 4.

If the patient's condition matches the Urgent priority move the cursor down to highlight the **Urgent** priority and press enter.



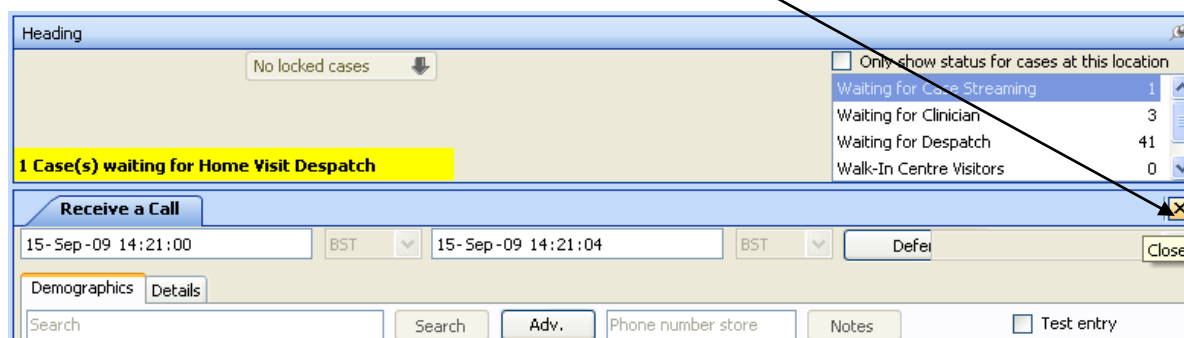
It is unusual for the Emergency priority to be used as these are life threatening conditions where the patient would be advised to call 999 or attend the nearest hospital A & E department. If a patient has declined the advice to call 999 or go to A & E and would prefer to discuss their case with the doctor then the patient is seen to have downgraded their call priority to **Urgent**. This should be recorded in the details section of the record at the time that you have advised them to call 999 or go to A&E.

Press the enter key to select the call priority.

Adastra will display the call number in a pop up box, click on the OK button to complete the record.

Adastra will automatically dispatch the call to the case streaming module in Adastra V3 OLC and your screen will display a blank call screen ready to take another call.

Note: Adastra has a built-in call timer. To enable accurate recording of each call, it is important to close the screen after every case before taking your next call



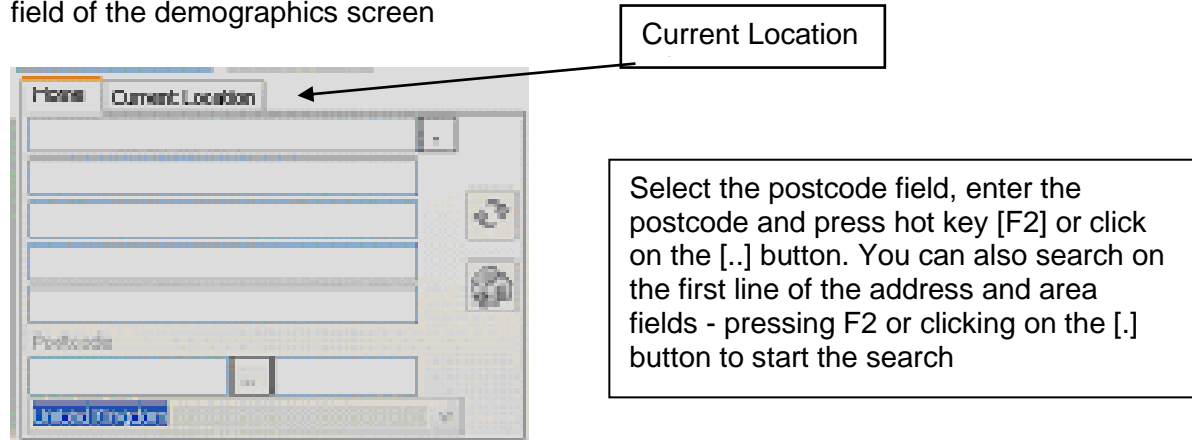
Close case button

Patient at another location

Where the patient is not currently at their home address, Adastra has the facility to enter the patient's current location. It is necessary to record these details to ensure that the doctor can either invite the patient to attend a treatment centre close to where they are residing or to have the correct address for the doctor to carry out a home visit.

The patient's home details have been completed as explained in the previous section.

To record the current address details select the current location tab in the address field of the demographics screen



Current Location

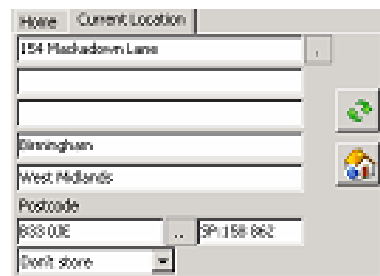
Select the postcode field, enter the postcode and press hot key [F2] or click on the [...] button. You can also search on the first line of the address and area fields - pressing F2 or clicking on the [...] button to start the search

The two icons at the side of the address fields perform the following functions:



The top icon enables you to switch the home address and the current location.

The bottom icon opens a free text field for any specific location details, e.g. cottage behind church.



In the current location screen, the last field enables you to select the duration that the patient will be at the current location.

It is important that you ask the patient how long they will be at the current location and do not accept the default of **don't store**.

Please note as stated by the CEO, if the patient is from a Badger Member surgery and they are in the Birmingham or Solihull area we can take the call. An upset Badger Member patient is an upset Badger Member Surgery.

Call Origin

If you are speaking directly to the patient, you will make a tick in the 'caller is the patient' box.

Caller

Caller is patient? ← Tick box if the caller is the patient

Name:

Relationship: ..

Contact Phone: 0121 693 4000

Walk-in patient

If, however, someone is calling on behalf of the patient you will need to obtain the caller's name, and then select the relationship with the patient from the 'relationship' field (using F2 or clicking on [..])

leading

No locked cases

Only show status for cases at this location

Waiting for Case Streaming 0

Case(s) waiting for Home Visit Despatch

Receive a Call

15-Sep-09 16:27:20 BST 15-Sep-09 16:29:48

Demographics Details

Double-click here to perform new patient search

Unlock

Initials: D Forename: Donald Surname: Duck Sex: Male

Contact

Home: 0121 693 4000

Mobile:

Other:

Cur. Loc:

Return Phone: 0121 693 4000

Home Current Location

4 Ashville Avenue

Birmingham

West Midlands

Postcode: B34 6LN .. SP:138 892

United Kingdom

Name	Usage
Health Protection Agency	Caller from HPA
Hospital	Caller from hospital
Hostel	call from hostel
Hotel	Call from a hotel
Option 13	Option 13 - Good Hope PCDU
Midwife	Call received from community midwife
Monitoring Service	Call received from monitoring service
Neighbour	Call received from neighbour
NHS DIRECT	patients where source is referral by NHSD
Nursing Home	Nursing Home
Other Source	Call received from un-listed source
Payphone	caller is at a payphone

Relationship: ..

Contact Phone: 0121 693 4000

Walk-in patient

In this circumstance, you will also need to obtain the telephone number of the caller, who is calling on behalf of the patient. Key this into the 'contact phone' field shown above.

4 Multiple patients at the same address

In some instances there may be more than one patient at the same address that wishes to register a call with the service; in these situations the call handler will take the details of the first patient as described earlier.

When entering the patient's condition in the details screen always annotate the record with the number of patients at the same address as shown in the example below:

Example: Patient 1 of 2 at the same address. Diarrhoea and vomiting for 24hours, no food taken for same and no meds taken.

When completing the first patient's call, ensure to tick **Multiple Case**. After pressing Store Call, the next screen will be attached to the original case, enabling the duty doctor to handle these cases at the same time.

The screenshot shows the Adastra 3.12.27 interface for Birmingham and District GP Emergency Services. The main window is titled 'Case entry' and displays patient information for 'T Tree Surgeon -- 06-Aug-67 (40 years) 0121 779 2853'. The 'Symptoms' field contains the text 'test call for multiples'. The 'Comments' field is empty. A 'Multiple case' checkbox is checked. The 'Store Call' button is visible, along with 'Amalgamate' and 'Sensitive' options. A red arrow points to the 'Multiple case' checkbox, which is highlighted by a box labeled 'Multiple case check'.

Details screen showing multiple check box

Multiple case check

With the multiple check box selected, you must complete the call for the first patient

After selecting the **Multiple case** checkbox

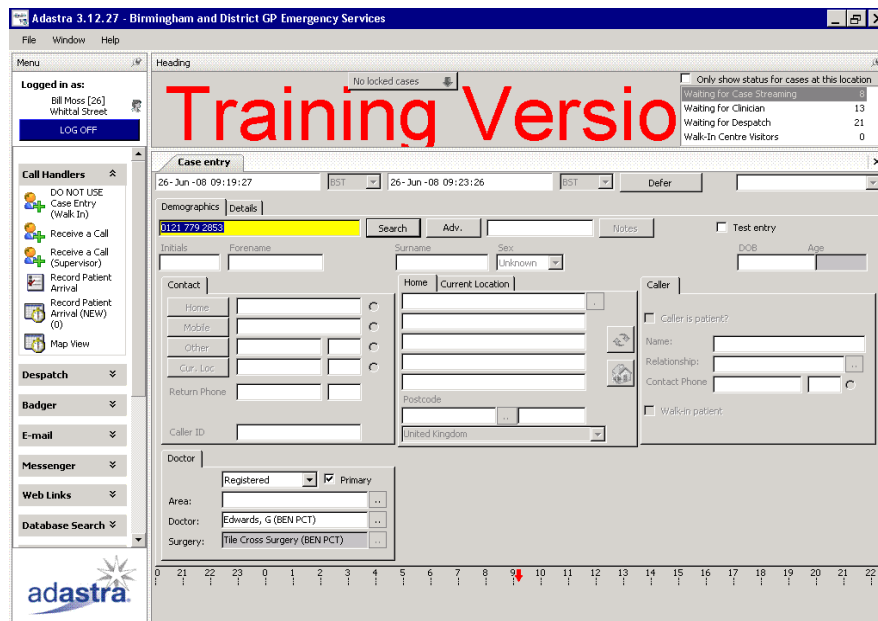
Click on the **store** call button

The **modify case type** screen is presented

Highlight and select the appropriate case type, normally **Advice** and click on the **next** button

The **modify priority** screen is displayed,

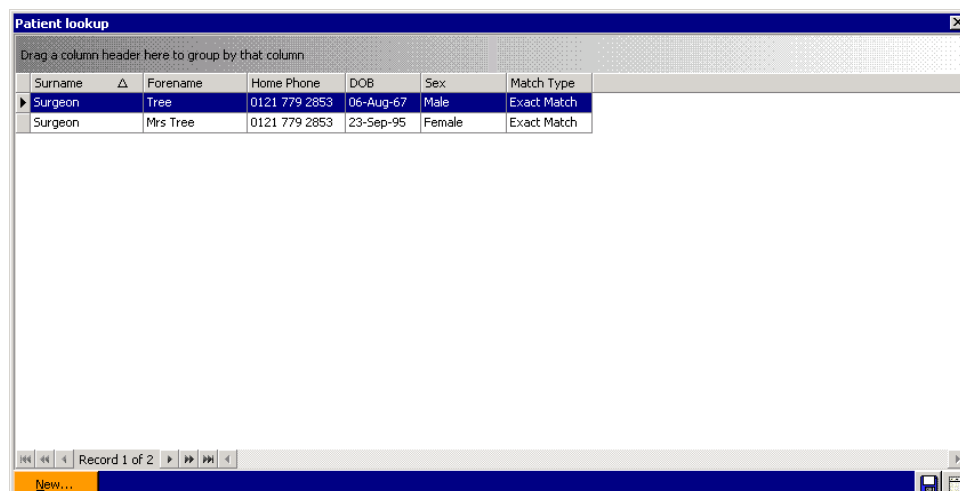
Highlight and select the appropriate priority, normally **routine**, Adastra will complete the call and return to the case entry screen, automatically completing the patient's **own doctor** field and entering the patient's home telephone number in the **search** field, as shown on the following page.



Multiple patient - default case entry screen

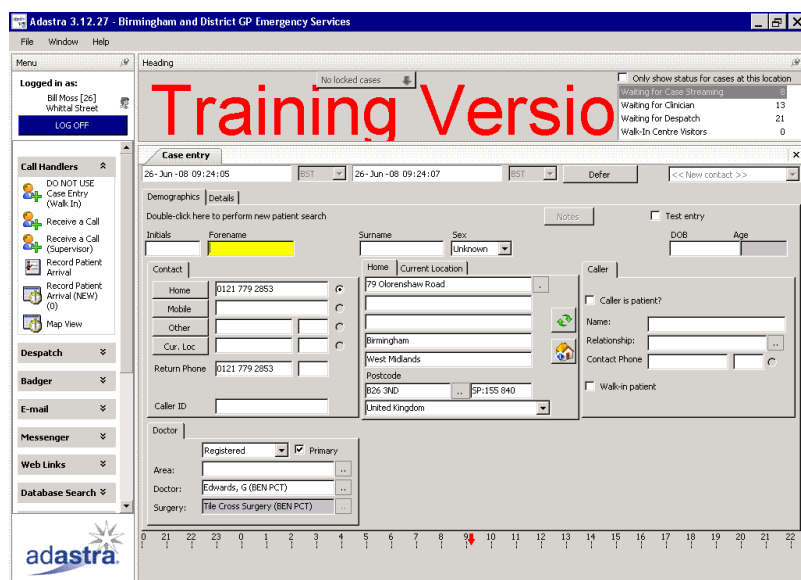
If the patient's contact details are the same as the first patient, accept the default telephone number details and click on the **search** button

Adastra displays a list of patients recorded against the telephone number, if the patient is listed select the record by moving the cursor to the entry and double clicking on it.



Multiple patient case entry pt lookup

Adastra will automatically complete the contact details of the patient record.



You must now complete the case entry by entering information in the remaining fields in the same way that you did for a basic call:

- **Forename**
- **Surname**
- **Sex**
- **Date of birth**
- **District**
- **Call origin**
- **Details screen**

If there are further patients at the address that need to use the service continue to take the details repeating this procedure.

When you have recorded the last patient details complete the call ensuring that the multiple case box is deselected and complete the call-in the normal way.

5 Recording Recognition of a Life Threatening Condition/ 999 Button

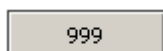
The National Quality Requirements in the Delivery of Out-of-Hours Services states in National Quality Requirement 9 - Telephone Clinical Assessment

Identification of immediate life threatening conditions:

Providers must have a robust system for identifying all immediate life threatening conditions and, once identified, those calls must be passed to the ambulance service within 3 minutes.

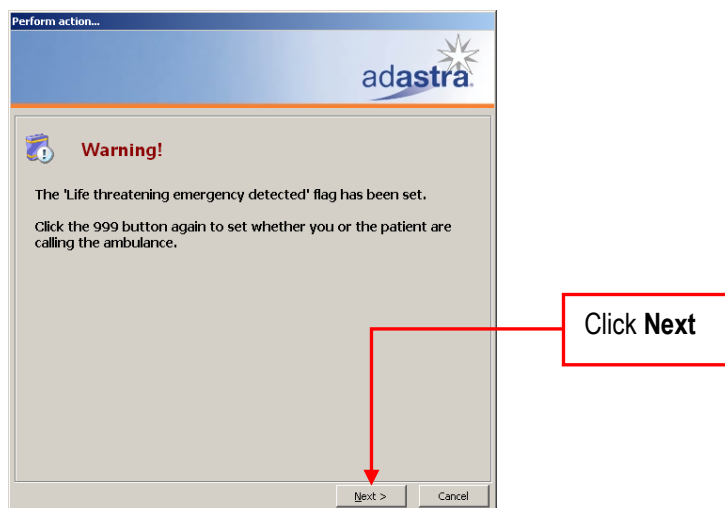
If at any point in the case entry process you have identified that the patient has a life threatening condition and should be referred to the emergency services this should be recorded in order for Badger to comply with the National Quality Requirement as stated above.

Using the 999 Button



➤ **The 999 process consists of 3 clicks**

Click 1. The first click records that the user has recognized that there is a Life Threatening Emergency. This is the first time stamp on the case for NQR 9 reporting



The 999 button will be highlighted in orange

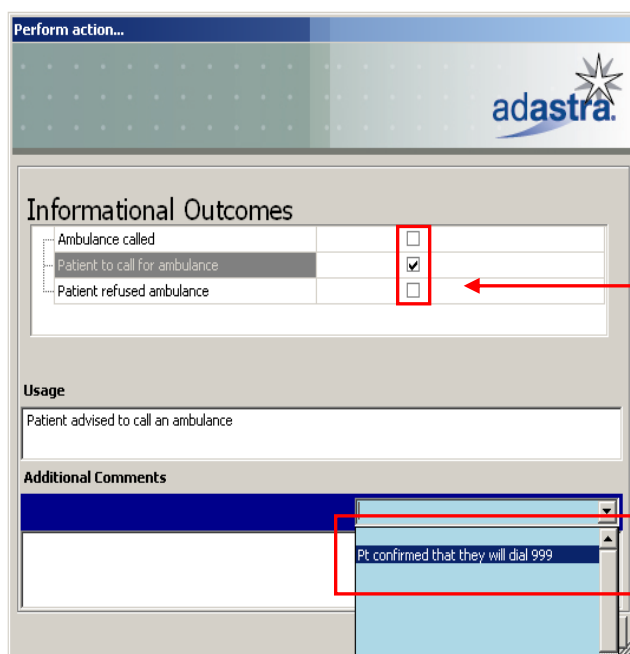


Click 2. Once you have passed the call to the emergency services or have advised the caller to contact the emergency services click the 999 button for the second time.



Click [Next] on the warning screen and the Informational Outcome screen will be displayed with 2 emergency pass options available

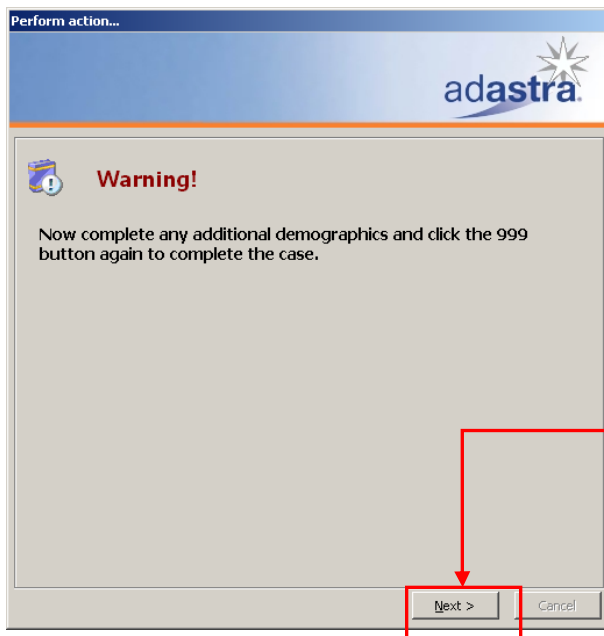
A warning notice will be displayed to advise the call handler of how to complete the case once all details have been recorded.



Select one of the options by clicking in the box next to it.

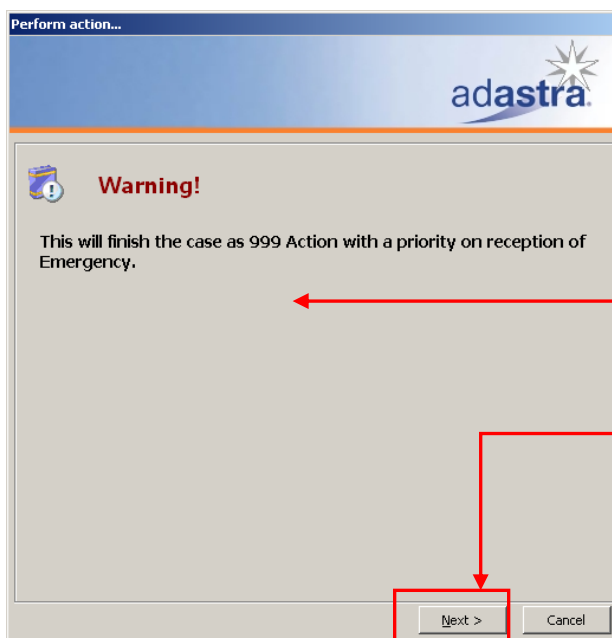
If the patient has agreed to call the ambulance select "Pt confirmed that they will dial 999"

Add any additional comments in the section at the bottom of the box using free text.



Once you click [Next] you will be returned to the case entry screen.

Click 3. Once all case details have been recorded, click the 999 button for the 3rd time to complete the case with the appropriate case type and an emergency priority on reception



A warning notice will be displayed to confirm that the case will be completed.

Click [Next] to complete the case. You will be presented with a case number and the call will be stored as complete.

The call is now complete with the case type set as 999 Action, and the priority has automatically been set to Emergency.

You will be presented with a case number and the call will be stored as complete. Write down the call number and pass onto the Team Leader/Assistant. The call is now complete with the case type set as 999 Action, and the priority has automatically been set to Emergency.

Event List

The Event List will record each time the 999 button is clicked. The first click records the time that the life threatening condition was identified. Using this information Badger is able to determine whether we comply with the National Quality Requirement.

Start Date	Finish Date	User	Event description	Entry Date
21-Aug-08 18:57:02	21-Aug-08 19:34:32	KALER	Case initially received	21-Aug-08 18:56:56
21-Aug-08 19:11:53	21-Aug-08 19:11:53	KALER	Informational outcome added - Life threatening emergency detected	21-Aug-08 19:11:53
21-Aug-08 19:20:10	21-Aug-08 19:20:10	KALER	Informational outcome added - Patient to call for ambulance	21-Aug-08 19:20:10
21-Aug-08 19:34:34	21-Aug-08 19:34:34	KALER	Case type set to 999 Action	21-Aug-08 19:34:34
21-Aug-08 19:34:34	21-Aug-08 19:34:34	KALER	Priority On reception set to Emergency	21-Aug-08 19:34:34

Click 1

Click 2

Click 3

Patient Audit

The call handler will pass the call number to the Team Leader/Assistant Team Leader and explain that it is for a patient/patient representative who has been asked to call 999. To ensure patient safety the Team Leader will wait five minutes and then phone the patient to check they have called for the ambulance. If there is no reply when calling the patient back you must call ambulance control to check if the ambulance has been arranged and if the patient has already been taken to hospital. If ambulance control confirm the patient has requested an ambulance ask for the reference number for our records. The numbers for Ambulance control can be found on AdastrA in Agency Information.

To dial BHam Ambulance Control dial 999

If a Patient Declines 999

There will be occasions where the patient declines 999; this may be due to them feeling their condition does not warrant an ambulance. Once they have clarified that an ambulance is not required you should follow the process below:

You will already have pressed the 999 button because you have identified a possible life threatening emergency. The 999 button will be highlighted in orange.

You will have advised the patient “based on the symptoms I am advising you to call an ambulance “

The patient has declined... they have advised their condition does not warrant an ambulance.

In this situation the steps below should be followed:

Step 1: Informational Outcomes

Press the 999 button a second time. You will now be presented with the Informational Outcomes box. Tick the *Patient refused ambulance* box and record any additional comment in the box. **Click Next**

Step 2:

Complete any demographic details you have outstanding. Proceed to ask the six key questions and at the end record in the **Symptoms Box** “pt declined 999”

Step 2:

Once all the information is documented you should click on **Store Call**.

Step 3: Modify Case Type

Select Advice

Step 4: Modify Priority

Select Urgent or Routine following the priority guidelines on page: 12

Step 5: Script

You must not read out the script to the patient/caller ensuring you confirm the patients contact number. Once you have done this, tick the **Return phone number confirmed** box.

The case will now be waiting in the Case streaming queue.

6 Deceased Patients

Recognition v Certification

Receptionists must be clear about the distinction between recognition of death and confirmation of death.

Recognition of death - is the examination of the patient to determine that they have passed away; once recognition has been carried out and the death confirmed the body of the deceased can be released to the undertaker.

Recognition of death can be carried out by a competent person who has been trained to carry out the five-checks for signs of life.

Certification of the death – is an obligation on the doctor who attended the deceased during his or her last illness. Certification can only be carried out by a medical practitioner or the coroner.

Exclusions

Children
Pregnant/possibly pregnant
Overdose
Hypothermia
Electrocution

In these circumstances these cases must be passed to or an ambulance called.

Taking the call

This procedure must be used in conjunction with the flow charts shown in appendix 1.

Full details must be taken of the identity of the deceased as well as the name and address of the caller and their relationship to the deceased. When taking a call about a deceased patient consideration must always be given to the needs of the surviving relative, carer or friend who is in attendance.

In the first instance establish where is the call coming from before continuing?

Emergency Ambulance Crew

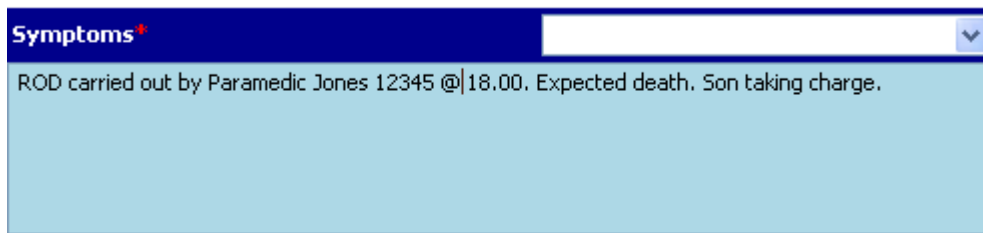
Normally the Ambulance Service will carry out confirmation of death, and pass details to us, for onward transmission to the deceased patient's doctor. Check for any Special patient notes.

How to Document a call – ROD Message to Pass to Surgery

If you receive a call from a Paramedic or a District Nurse advising you they have carried out an ROD on a Patient you must follow the process on the next page to ensure the information is

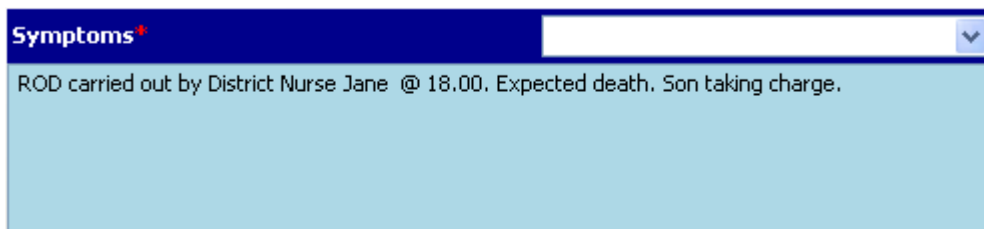
passed to the surgery the next working day enabling the Doctor to carry out the Confirmation of Death and the death certificate can be issued.

- 1) Document the Patient (deceased) demographics.
- 2) Next record the details shown in the two examples below:



Symptoms [dropdown arrow]

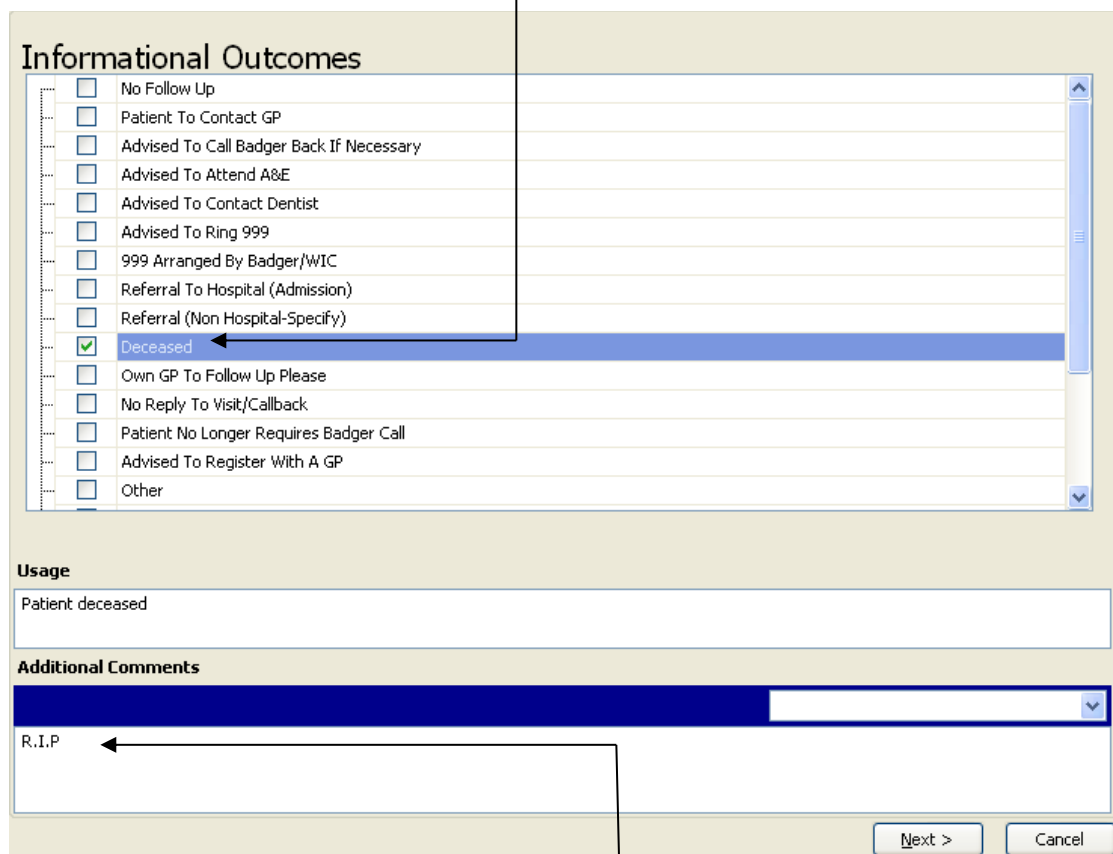
ROD carried out by Paramedic Jones 12345 @ 18.00. Expected death. Son taking charge.



Symptoms [dropdown arrow]

ROD carried out by District Nurse Jane @ 18.00. Expected death. Son taking charge.

- 3) Store the call and select 'Reception Advice'
- 4) Next click on 'Routine'
- 5) Tick the Deceased box



Informational Outcomes

<input type="checkbox"/>	No Follow Up
<input type="checkbox"/>	Patient To Contact GP
<input type="checkbox"/>	Advised To Call Badger Back If Necessary
<input type="checkbox"/>	Advised To Attend A&E
<input type="checkbox"/>	Advised To Contact Dentist
<input type="checkbox"/>	Advised To Ring 999
<input type="checkbox"/>	999 Arranged By Badger/WIC
<input type="checkbox"/>	Referral To Hospital (Admission)
<input type="checkbox"/>	Referral (Non Hospital-Specify)
<input checked="" type="checkbox"/>	Deceased
<input type="checkbox"/>	Own GP To Follow Up Please
<input type="checkbox"/>	No Reply To Visit/Callback
<input type="checkbox"/>	Patient No Longer Requires Badger Call
<input type="checkbox"/>	Advised To Register With A GP
<input type="checkbox"/>	Other

Usage

Patient deceased

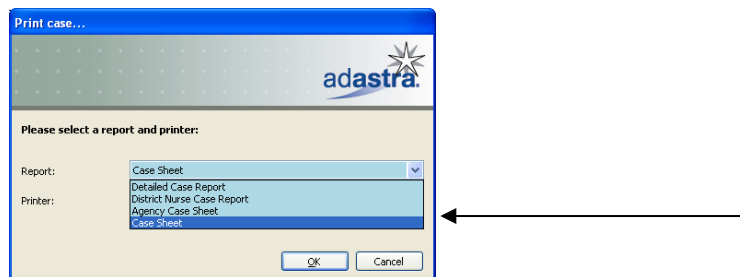
Additional Comments

R.I.P.

Next > Cancel

- 6) Record R.I.P in the Additional Comments box

- 7) Note down the call (you will need this) and go to Database Search and select Look up Case Details from the menu. Enter the call number you have recorded and search for your call. Double click into your call. Next you will need to print a call sheet. Go up to the top left hand corner and select print.
- 8) Select Case Sheet from the drop down menu as shown and click on 'Ok'



- 9) You will now need to ascertain the surgery fax number to enable you send the call sheet to the surgery. While in Database Search select Surgery Details, type the name of the surgery and click into the details. Document the Fax number your name and time on the printed call sheet.
- 10) Fax the call and hand the call sheet to the Team Leader on duty for them to document on their report.

In some circumstances the Ambulance service may require assistance if a surviving relative is in need of care. Please accept these calls.

If the Ambulance Service insists on us attending to carry out a routine confirmation of death, accept the call and we will invoice them. Always ensure you use the call origin 'Ambulance' so that a record is kept.

Nursing Home or Nurse in the Community

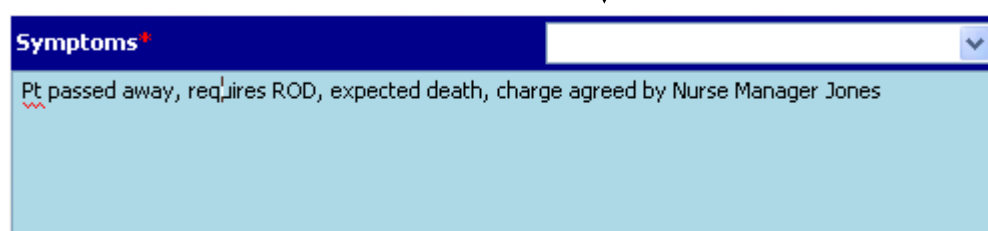
Establish name of the nurse and ask to speak to the Nurse in Charge.

Check that it is a registered Nursing Home and not a residential home.

If the nurse / nurse in charge insists that they will not carry out ROD, inform them there will be a charge (**See ops & procedures – Receptionists - R06**), this will have to be authorised by the Nurse Manager. Once this has been done raise a call, in these situations advise the Team Leader who will put this on the Team Leaders report.

How to Document a call – Nursing Home Requiring ROD (Birmingham)

- 1) Record the Patients/deceased demographics record the name of the caller and their job title and select Nursing home from the drop down menu in the relationship to caller field.
- 2) In the symptoms box document the following: ↓



- 3) Store the call and select Home Visit, the call will now move to the Despatch screen.
- 4) Inform the Team leader that the Nursing home has agreed to the cost.

Police

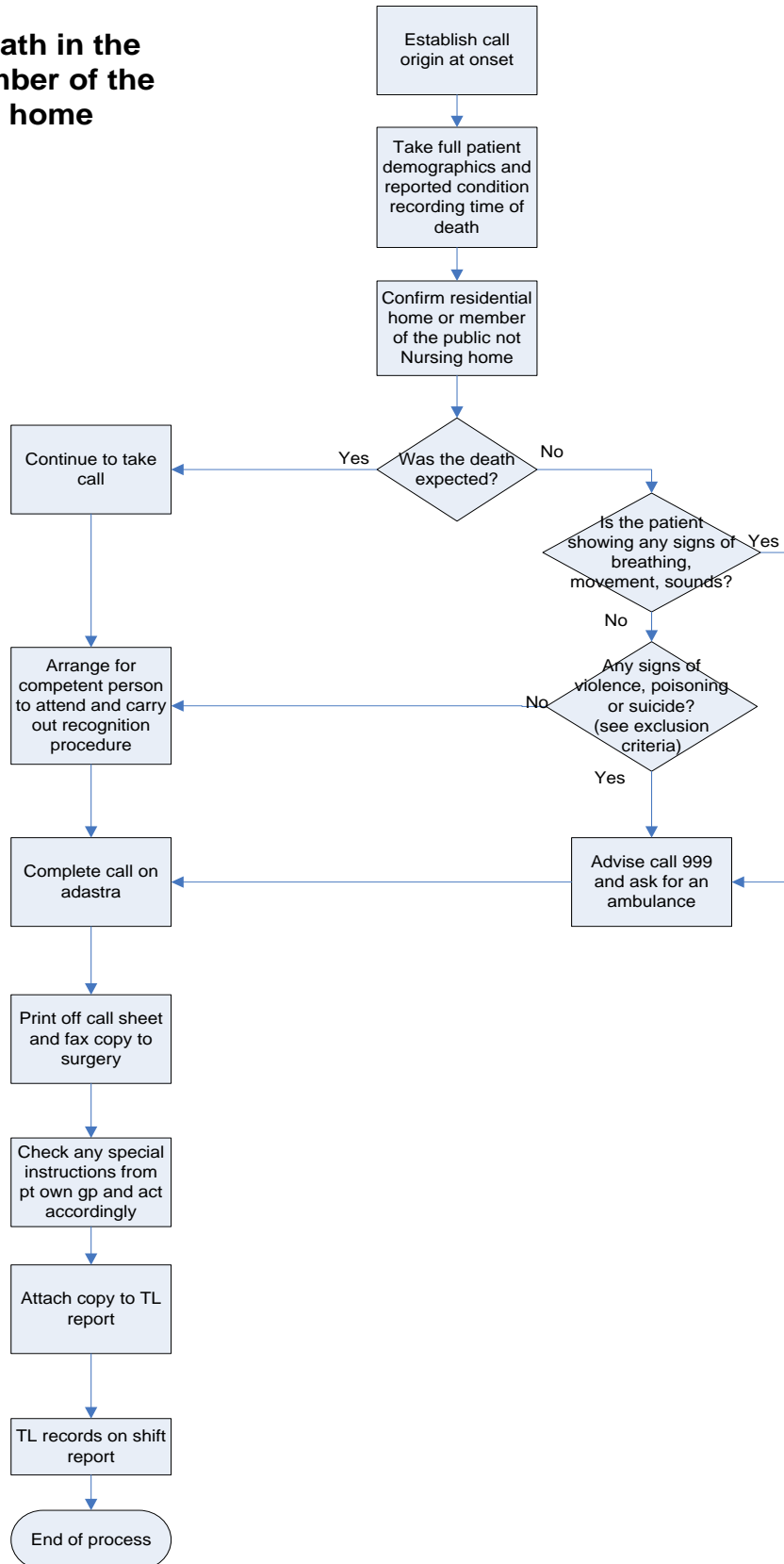
Is the death suspicious?

- **Yes** – Ask for Police Surgeon or Forensic Medical Examiner to deal
- **No** – Receive call

Member of the Public / Residential Home

- **A** – Was the death expected?
- **Yes** – arrange for competent person to attend to carry out recognition procedure – usually doctors visit needed.
- **No** – Proceed to section B
- **B** – Is the patient showing any signs of life eg. Breathing, movement, sounds?
- **Yes** – advise dial 999 ask for an ambulance
- **No** – Proceed to section C.
- **C** – Is there any suspicion of violence, poisoning, accident or suicide? Does this call relate to a child (except an expected death in a child with terminal illness), a pregnant woman, a drowning, an overdose or an electrocution?
- **Yes** – advise 999, ask for ambulance
- **No** – arrange for competent person to attend to carry out recognition procedure: usually doctors visit needed
- **D** – Check any special instructions from the patient's own GP and act accordingly. Send full information to patients own GP as soon as possible.

Recognition of Death in the Community – Member of the public/Residential home



7 Message Handling: Passing calls to Doctor(s)

Some of the Doctors we cover may request Badger to take calls from their patients and then pass the details to them over the phone. Follow the process below.

1. Enter Dr Ahmed into doctors field and select Newport road, some patients may refer to the surgery as Stoney Lane, you should still enter Newport Road.

Enter: Dr Ahmed
Newport Road

Check: The Timeline

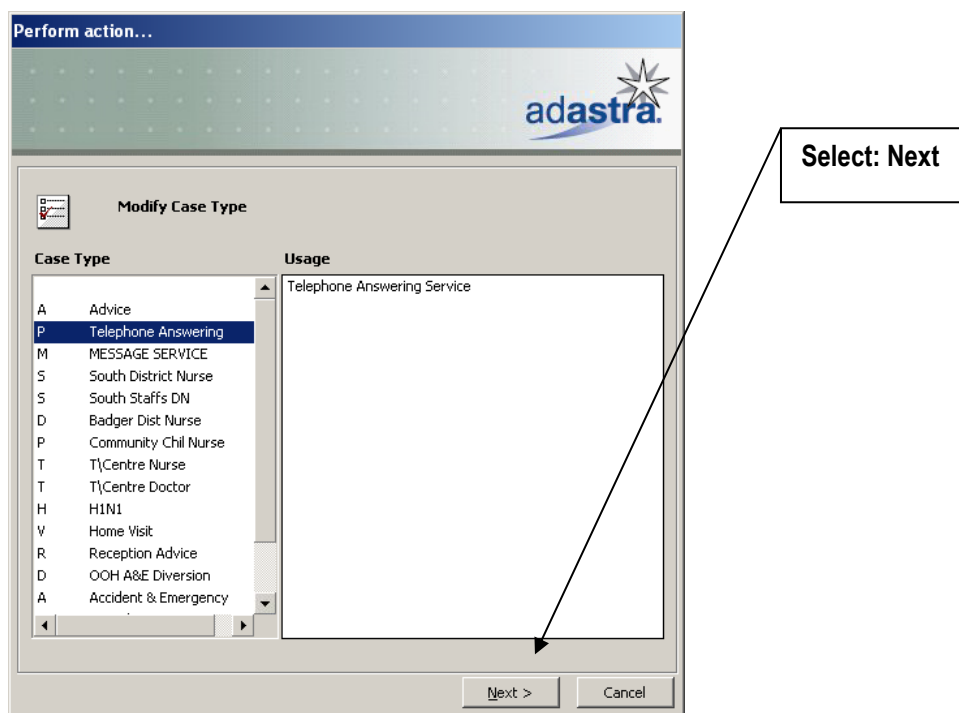
2. Continue to take the call completing all the fields including the details tab.

Tick box

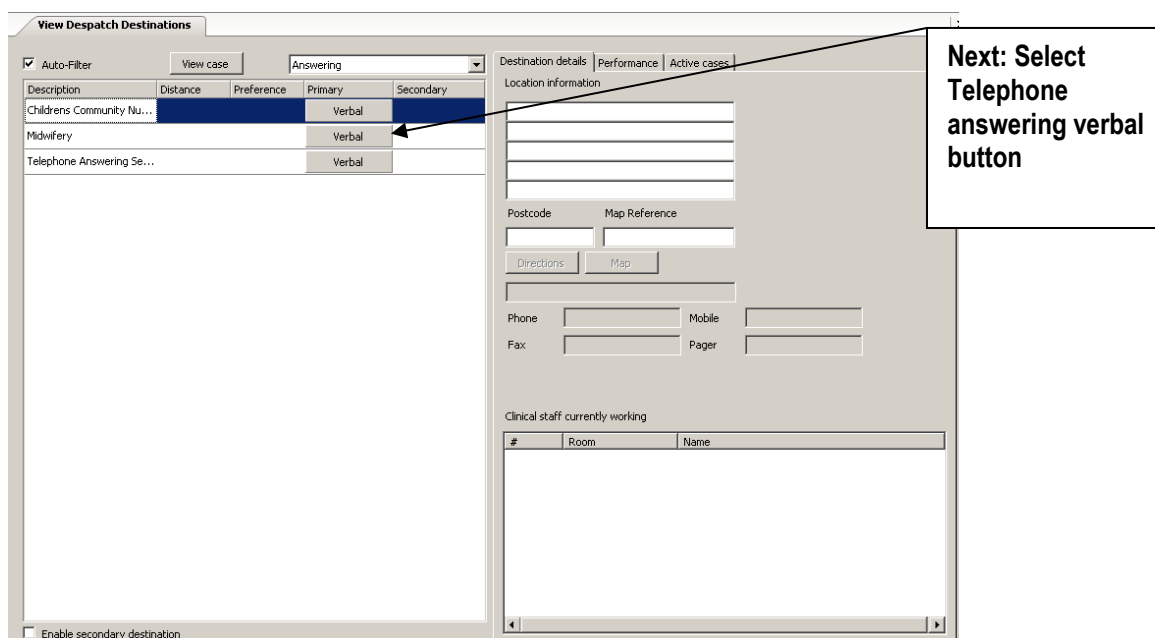
When this screen presents it is a special note re: circumcision, tick if appropriate and continue with the call. If it is not relevant select cancel and proceed to the next page.

3. Store the call

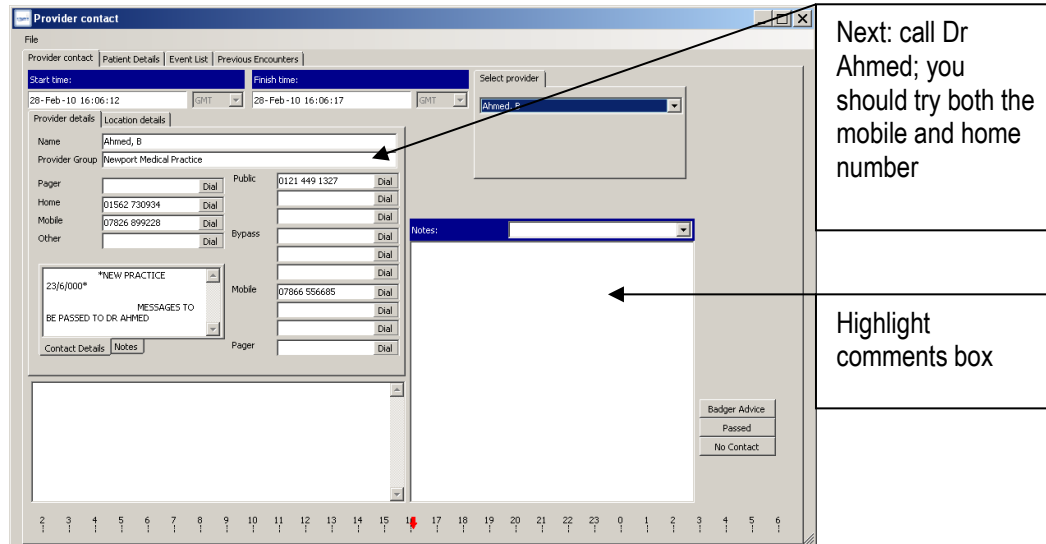
4. If the time line stated: pass to own gp (Ahmed B) the Modify Case type screen will default to **Telephone Answering**



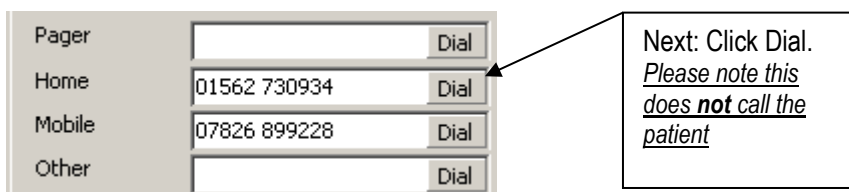
5. Select appropriate priority Routine or Urgent
6. You will then be presented with the Despatch Destinations screen (please see below)




7. Next Provider Contact screen will present (please see next page)



8. When you speak to Dr Ahmed explain to him that you are calling from Badger and you have received a call from one of his patients, pass all the details of the patient to him and the reason for the call. Dr Ahmed will either decide to accept the call or ask for Badger to cover.
9. If Doctor Ahmed accepts the call highlight the comments box (shown in picture on previous page) and enter Dr Ahmed accepted the call. Next click on
10. If Doctor Ahmed requests Badger to cover the call, highlight the comments box and enter Dr Ahmed requests Badger to cover the call. Next click on the call will now go into the assessment pool.
11. If you are unable to contact Dr Ahmed there are two ways you can log this.
 1. In the highlighted comments box enter the reason you have been unable to contact Dr Ahmed and click on . The call will now stay in the despatch screen.
 2. Call Dr Ahmed on either his home or mobile ,



Next: Select the reason you have been unable to contact Dr Ahmed, you can also add comment in the highlighted box

Note: If you decide to follow number (2) you will have to click out of the call by clicking on  the call will now be in the despatch screen.

- It is the call handler's responsibility to try to pass the call. If after 20 minutes you have been unsuccessful follow number (10) explaining that Badger is to cover call as unable to contact Dr Ahmed and process he call.

8 Her Majesty's Prison (HMP) BIRMINGHAM

Badger provides an out of hour's service to the prison healthcare department.

Hours of Cover

Cover is provided during the following times:

- 21:00 to 08:30 hours Monday to Friday
- All day Saturday, Sunday and bank holidays.

Reporting

Calls will be usually be made by a prison nurse, usually an E/F grade. The nurse will have done the initial observation.

Recording Call Details

The following call information will be recorded:

- Doctors Field : **PRISON HMP BIRMINGHAM**
- A special note will now present [see below]. Please tick and follow the instruction

Next Tick

Selected	Review Date	Match description
<input checked="" type="checkbox"/>	22-Aug-10	Free-form note match: ** The HMP Birmingham - Call Sheets must be passed to the Supervisor on Duty not to the doctor - Dr Wilson must be informed if a visit is required **
<input checked="" type="checkbox"/>	01-Oct-04	Free-form note match: ** The HMP Birmingham - Call Sheets must be passed to the Supervisor on Duty not to the doctor - Dr Wilson must be informed if a visit is required **

** The HMP Birmingham - Call Sheets must be passed to the Supervisor on Duty not to the doctor - Dr Wilson must be informed if a visit is required **

Name: _____ Phone number: _____ DOB: _____
Address: _____
Provider: Prison HMP BIRMINGHAM
Provider Group: HMP Birmingham (Special Project)

OK Cancel

- Record Patients: **NAME**
- Record Patients: **Date OF BIRTH**
- Record Patients address details: **HMP Prison Winson Green
Winson Green Road
Birmingham**
- Record callers name and job title
- Call type: **PRISON SERVICE**
- Record callers direct dial number (DDI) or extension number

- Take reason for the call and store as advice and select appropriate priority
- At this point your case will show 'view despatch destinations' so you must click the small 'x' on the right of the case. This leaves the case in despatch for the Team Leader to deal with.

- Inform the Team Leader of the call number
- Team Leader to contact Medical Director on call

9 Special Projects

St Giles Hospice - Out of Hours Cover

St Giles Hospice provides high quality individual care for local people living with cancer and other serious illnesses as well as support for their families and helpers. Badger will provide the following **Out of Hours** cover....

Whittington (Lichfield): Monday to Friday – 18.30 to 08.00
Alternate weekend cover from Badger ends at 07:59
on Saturday and recommences at 18:30 on Monday evening
and every bank holiday – 24 hour call out and telephone advice

Walsall: Monday to Friday – 18.30 to 08.00
Weekends and every bank holiday – 24 hour call out and
telephone advice

Centre Location

Walsall Palliative Care Centre
Goscote Lane
Walsall

WS3 1SJ

Tel: 0800 7839050 or 01922 602610

St Giles Hospice
Fisherwick Road
Whittington
Lichfield
WS14 9LH

Tel: 01543 432031

Calls will be received on the Health Care Professional line.

The screenshot shows a medical software interface with a 'Lookup Case Details' window. The window has tabs for 'Demographics' and 'Details'. A 'Lookup' dropdown menu is open, displaying a list of names and addresses. The 'Doctor' field is set to 'WALSA' and the 'Surgery' field is empty. The 'Caller' section has a 'Patient Check' button and a 'Lookup' button. The interface includes search fields, buttons for 'Adv.', 'Phone number store', 'Notes', 'Script', and 'Test entry'. A status bar at the bottom shows 'Record 1 of 9' and a date range from 22- Jul -14 11:12:08 to 22- Jul -14 12:00:27.

1. In the Doctor field depending on where the patient is record either

- Walsa (Walsall St Giles) Check the Timeline to ensure we are covering.
- Or
- Lic (Lichfield, St Giles) Check the Timeline to ensure we are covering.

2. Record the patients demographics

- Name
- Sex
- Date of birth
- Home telephone number
- Current location telephone number (Walsall or Lichfield St Giles Hospice)
- Home address
- Current address (Walsall or Lichfield St Giles Hospice)
- Relationship to Caller: Record the name of the caller and their role. Select either **Wal** and select Walsall Palliative Care OOH or **Lic** and select Lichfield Palliative Care OOH as shown below

The image shows two side-by-side screenshots of a 'Caller' form. Both forms have a 'Caller is patient?' checkbox (unchecked), a 'Name' field with 'Sn Jones', and a 'Contact Phone' field with '0121 766 2101'. The left form has a 'Relationship' dropdown set to 'WALSALL PALLIATIVE CARE', while the right form has it set to 'LICHFIELD PALLIATIVE CAR'. A double-headed arrow is positioned between the two forms, pointing from the right one back to the left one.

You must remember to record a contact number for the caller

In the details box record the:

- The patients own GP and surgery details
- Patients symptoms
- How long they have had the symptoms
- Any meds taken
- Past medical history
- Regular meds

See the example below:

The image shows a screenshot of a 'Symptoms' form. The title bar is blue with 'Symptoms' in white. Below the title bar, there is a text area containing the text: 'Dr Jones, Walsall Surgery, in severe pain, 2 hours, morphine taken, PMH: Cancer of throat, Reg meds various'. There is a dropdown arrow on the right side of the text area.

3. Click on Store Call

4. A warning message will now be presented. Ensure you follow the instructions before proceeding
5. This will automatically set the case for a call back within 30 minutes.
6. The Aadastra system will be configured to highlight the priority of the call

Call Pathway for Walsall and Lichfield Palliative Care

Call received (enter Walsa (Walsall St Giles) or Lic (Lichfield, St Giles) and demographics)



Select Call Origin *Lichfield Palliative Care*



Record details of patients condition



Store Call



Check tel no. and case no. box will show



WPCC 30mins will be automatically set



Call will now bypass Case streaming into the Assessment Pool



Any Clinician can triage the call and either forward as Home Visit or Complete the call as Advice

IMPORTANT:

Please **do not** advise the caller to call 999 or attend A+E.

When you have stored the call please send an **instant message** to the Team Leader advising them of the call number so these calls can be closely monitored.

St Giles Hospice – Medical Clerking End of Life

Badger also receives calls for patients who require Medical Clerking for (end of life) EOL admissions. These calls must be recorded in the following way.

The screenshot shows a software interface for recording a call. The 'Doctor' field contains 'WALSAL'. A dropdown menu is open, listing the following entries:

Lookup	Name
Kaul, P.L	New Road Medical Centre - Dr Kaul & Par...
Kaul, Piarey	Harden Health Centre - Kaul & Gill
Kaul, Sandeep	Harden Health Centre - Kaul & Gill
Pabrinkiene, R. (Walsall)	Collingwood Family Practice (Walsall)
Rani, Raj (Walsall)	Collingwood Family Practice (Walsall)
Sikka, J. S. (Walsall)	New Road Medical Centre - Dr Kaul & Par...
Sridhar, Sahana (Walsall)	Collingwood Family Practice (Walsall)
Walsall, St Giles	St Giles Walsall
Walsall-Ghost	Walsall-Ghost

1. In the Doctor field depending on where the patient is record either
 - Walsa (Walsall St Giles) Check the Timeline to ensure we are covering.
 - Or
 - Lic (Lichfield, St Giles) Check the Timeline to ensure we are covering.
2. Record the patients demographics
 - Name
 - Sex
 - Date of birth
 - Home telephone number
 - Current location telephone number (Walsall or Lichfield St Giles Hospice)
 - Home address
 - Current address (Walsall or Lichfield St Giles Hospice)
 - Relationship to Caller: Record the name of the caller and their role. Select either **Wal** and select Walsall Palliative Clerking or **Lic** and select Lichfield Palliative Clerking as shown below

You must remember to record a contact number for the caller

3. In the details box record the:

- The patients own GP and surgery details
- Patients symptoms
- How long they have had the symptoms
- Any meds taken
- Past medical history
- Regular meds

See the example below:

4. Click on Store Call

5. A warning message will now be presented. Ensure you follow the instructions before proceeding

6. This is a St Giles call, Please inform the team leader of the call and also make sure the correct surgery is selected, either St Giles Walsall or St Giles Lichfield

7. The call will now be in Despatch

8. The call will now be displayed in the despatch screen in

9. The Team Leader will now arrange for the call to be despatched ensuring it is carried out within 1 hour

Action Cards can be found in the Doctors visiting bags and on the comms tab. These cards include...

- Do's and don'ts
- Record keeping
- Templates for clerking
- Remote prescribing

Calls from Biochemistry

These calls will come from Hospital departments; biochemistry / lab technicians / haematology etc. They will be calling with blood results which would normally be passed to the patient's own Surgery but are deemed too urgent to wait until then.

In a lot of cases they do not have the patient's telephone number in which case you need to enter the relevant number of zero's into the telephone number field.

The call details should be entered as per any other call until you reach the Caller details.

Name field: Name of caller, department and name of hospital.

Relationship field: Hospital

Contact Number field: Contact Number for the person calling

In the details tab full details of the blood results must be taken – ask for the spelling of any names you are unsure of and ask what result is of concern to them if they do not already state this.

Lordswood Special Scheme

Lordswood House Surgery are members of the Badger Co-operative. They have since the inception of Badger, held a Saturday morning surgery. The implication of this is that they may be unable to complete any ensuing visits within the time window of the doctor's session.

Badger will undertake these visits provided that they are passed by a doctor.

Calls will be passed by fax to 0121 766 5135 by a named doctor from the practice. They will make a call to Badger on 0121 766 2120 (ext 3120) to confirm that we have received the fax.

Process

Enter the call in the normal way, but under the practice, select LORDSWOOD VISIT PILOT and enter all the demographic details. Then instead of forwarding the call to 'case streaming' forward the call as a visit, adding the priority as directed by the Lordswood doctor.

The call can then be despatched by the Visit Coordinator to the nearest available car. Issues (if any) should be documented and attached with the original fax to the Team Leaders Report, if necessary advice from the on call Medical Director can be sought.

Lordswood Visit – Case Entry

Calls will be passed by fax to 0121 766 5135 by a named doctor from Lordswood House Practice in Harborne. They will make a call to Badger on 0121 766 2120 (ext 3120) to confirm that we have received the fax.

Enter the call in the normal way, but under the Doctor details, select LORDSWOOD VISIT PILOT.

Doctor	Registered	<input checked="" type="checkbox"/> Primary
Area:		..
Doctor:	Lordswood Visit Pilot	..
Surgery:	LORDSWOOD VISIT PILOT	..

Enter all other demographic details as per normal BADGER call.

Call handlers will be required to set the relationship to caller / call origin as **Surgery**.

Caller

Caller is patient?

Name:

Relationship:

Contact Phone:

Walk-in patient

In the name field enter the name of the Doctor passing the call.

The relationship field should be filled in as **Surgery**.

Ensure you obtain a contact number for the Doctor passing the call-in case they are needed to be contacted. i.e. incorrect details for the patient.

Once you've selected to store the call, ensure that you select the case type as HOME VISIT.

NOTE: These calls are NOT to be set as advice to be triaged. These calls are to bypass the case streaming and the triage process.

Perform action...

adastra

Modify Case Type

Case Type	Usage
A Advice	Patient to be visited at home
A Telephone Answering	
M MESSAGE SERVICE	
S South District Nurse	
D Badger Dist Nurse	
P Community Chil Nurse	
T T\Centre Nurse	
N T\Centre HG Nurse	
T T\Centre Doctor	
V Home Visit	
R Reception Advice	
D OOH A&E Diversion	
C Accident & Emergency	
D Dental	
W WMAS Special Project	

Next > Cancel

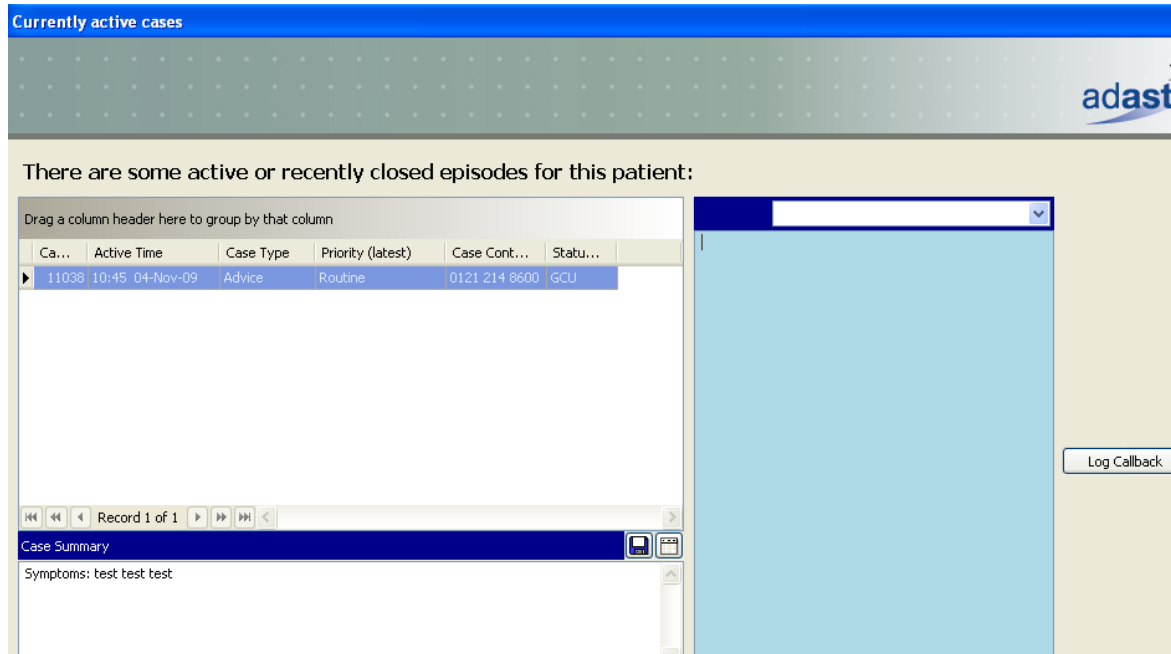
Set the priority of the case as directed by the Lordswood Doctor and complete case entry.

The call can then be despatched by the Visit Coordinator to the nearest available car and the Home Visit can be carried out.

10 Logging Callbacks from & to patients – Adastra/Call handlers

Logging a Callback from a Patient or Representative

When a patient calls in stating they have made a previous call **always** start to take the patients demographics in the usual way. When you enter the patients telephone number ensure the caller is giving you the number, they gave you on the previous call. Next select the patient from the list. The following screen will then appear.



If the patient or the patient's representative calls back to say they have missed a call back it's important to establish what the status is. A clinician or call handler may have tried to call the patient.

Ca...	Active Time	Case Type	Priority (latest)	Case Cont...	Statu...
10709	20:22 01-Jul-09	T\Centre Nu...	Routine	07983 222111	DESPAT...
11039	14:19 04-Nov-09	Advice	Routine	0121 693 4000	OLC
40681	14:27 04-Nov-09	T\Centre Nu...	Routine	0121 693 4000	CLOSED
11039	14:19 04-Nov-09	Advice	Routine	0121 693 4000	GCU

Check the status. If call is in despatch log callback, then advise pt where to attend and despatch the call.

OLC

This means the call is in the Assessment pool.

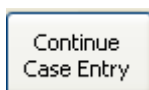
GCU

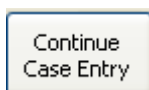
This means the call is in Case streaming.

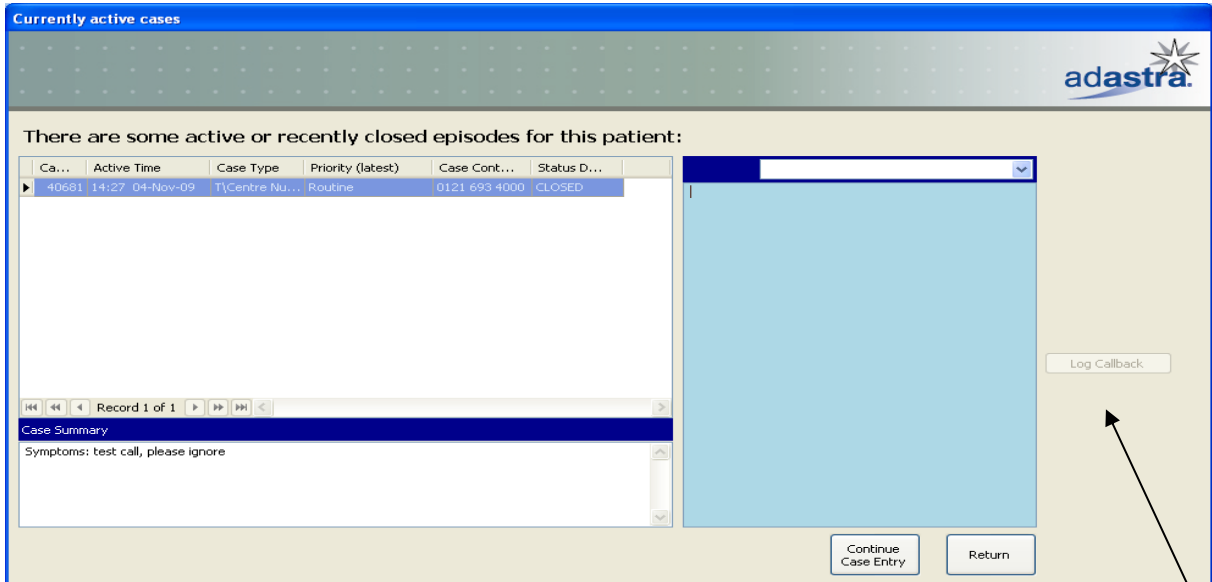
DESPAT...

This means the call is in Despatching

The screen below shows calls that are active or any recently closed episodes for the patient for up-to 72 hours. If your screen looks like the one below it means that there previous call is now closed and you will not be able to log a callback. If your screen does look like this

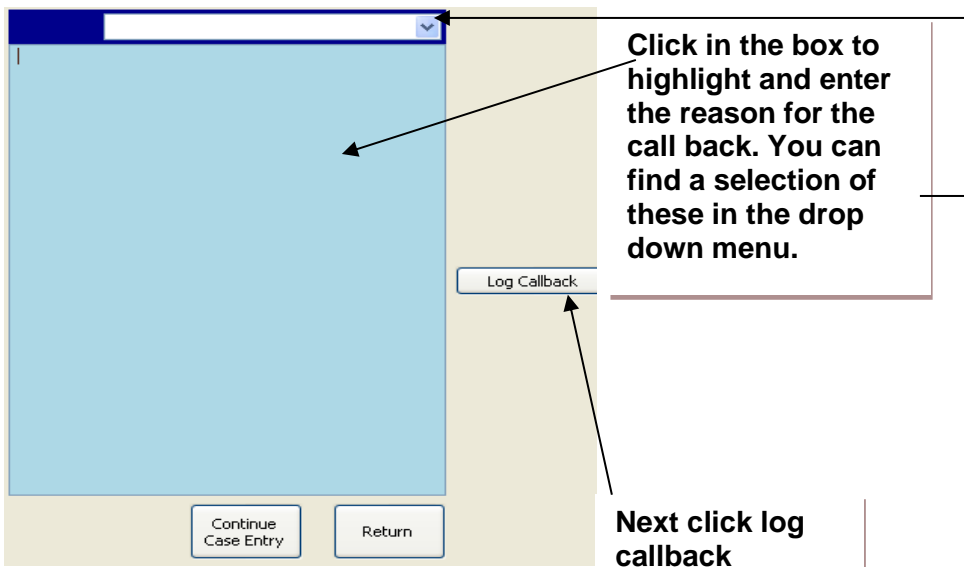


Click on . You will now return to the demographics screen and you can continue to take the call.



The Log Callback tab is no longer highlighted.

If the status is either OLC or GCU you are able to log the reason why they are call back.



Below are some examples why patients or their representative call back.

- Patient getting worse.
- Patient called to enquire when they would receive a callback.

A screen will then pop up to say that a callback has been logged.

Then finally click o.k. to confirm.

Case Type	Status	Explanation
T/C Nurse	Despatch	Waiting in Despatch to be telephoned back to be offered T/C appt
T/C Nurse	Waiting for Clinician (OLC)	Appt already booked into T/C
Home Visit	Despatch	Waiting to be sent to a car for a visit
Home Visit	Waiting for external source	Visit has been passed to a car
Advice	Waiting for Clinician (OLC)	In A/P waiting for clinician to call back
Advice	Case Streaming	In case streaming still

11 Sign-off

Module 3: Call Handling

Training Log

TRAINEE NAME:

Please use this log to record your training sessions with the Training Team Trainer or Clinical Lead for each Module.

Session	Date	Time	Trainer / Clinical Lead Name	Trainer / Clinical Lead Sign	Trainee Sign
1					
2					
3					
4					
5					

Training / Clinical Lead Sign-off

Assessment to be completed by the Trainer

Staff member name: Assessment by Trainer:

Competency:	Assessed by (Full name):	Date:	Trainer Signed:
Competency 1 - Taking a call <input type="checkbox"/> Aداstra and telephone logging in and out <input type="checkbox"/> Locking the screen <input type="checkbox"/> Standard Greeting <input type="checkbox"/> Accurate use of call script			
Competency 2 – Inputting a Patient on Aداstra <input type="checkbox"/> Check surgery timeline <input type="checkbox"/> Inputting if patient in database <input type="checkbox"/> Inputting if patient not in database <input type="checkbox"/> Amend/Unlock records <input type="checkbox"/> Taking contact numbers <input type="checkbox"/> Address / Postcode Search <input type="checkbox"/> Home Address / Current Location <input type="checkbox"/> District / Area 4th line <input type="checkbox"/> Caller / Relationship Box			
Competency 3 – 6 Key Questions <input type="checkbox"/> Symptoms <input type="checkbox"/> How long <input type="checkbox"/> What medication taken already <input type="checkbox"/> Previous Medical History <input type="checkbox"/> Regular Medications <input type="checkbox"/> Have they seen own GP? <input type="checkbox"/> Documenting the information accurately <input type="checkbox"/> Seeking help from TLA if needed			
Competency 4 – Call Priorities <input type="checkbox"/> Process a call that requires 999 <input type="checkbox"/> Process a call that requires an urgent call back <input type="checkbox"/> Process a call that requires a routine call back <input type="checkbox"/> Process a call that requires A&E <input type="checkbox"/> Process a call that requires reception advice			
Competency 5 – Multiple Patients <input type="checkbox"/> Recording patients as, for example (1/2) <input type="checkbox"/> Click the ‘multiple’ Box <input type="checkbox"/> Give accurate advice where multiple patients on same call have different outcomes			

Competency:	Assessed by (Full name):	Date:	Signed:
Competency 6 – Deceased Patients <input type="checkbox"/> Recognition of Death – Arrange home visit <input type="checkbox"/> Recognition of Death – Inform surgery <input type="checkbox"/> Recognition of Death – Nursing home			
Competency 7 – Pass to own GP <input type="checkbox"/> Identify case as Pass to own GP from timeline <input type="checkbox"/> Store as Telephone Answering <input type="checkbox"/> Dispatch correctly			
Competency 8 – Prison Calls (HMP Birmingham) <input type="checkbox"/> Call entered correctly onto Adastra <input type="checkbox"/> Team Leader notified of call			
Competency 9 – Special Projects <input type="checkbox"/> St Giles Hospice (Out of Hours) <input type="checkbox"/> Walsall and Lichfield Palliative care <input type="checkbox"/> St Giles Hospice (Medical Clerking End of Life) <input type="checkbox"/> Biochemistry <input type="checkbox"/> Lordswood Special Scheme			
Competency 10 – Logging Call Backs <input type="checkbox"/> Reason for call back identified and dealt with appropriately, e.g. worsening condition, cancellation <input type="checkbox"/> Call back logged accurately on Adastra.			
Competency 11 – Adastra Database <input type="checkbox"/> Look up Case Details <input type="checkbox"/> Look up Patient Details <input type="checkbox"/> Case Tracking all Locations <input type="checkbox"/> Surgery Details <input type="checkbox"/> Case Edit <input type="checkbox"/> Event list			

SIGN OFF FOR ALL CALL HANDLER COMPETENCIES

Date:

Staff member (Full name): Signature:

Trainer/TL (Full name): Signature:

Assessment Questions

Staff Member Name: **Date:**

1. What would you do if a Pharmacy calls in with a query regarding a prescription issued by Badger?	
2. Where can you locate the chemist information on Adastra?	
3. A nursing home requests a visit for ROD. How much is the charge for this and what information should you document in the details regarding this?	
4. When taking a Doctor call, the caller is not sure of the postcode. What would you do?	
5. Where on Adastra would you record details of the key safe number for a patient's address?	
6. What would you type in the doctor field for a Birmingham Prison call?	
7. You receive a call from a family member asking questions regarding a patient. What would you do? What information would you give out?	
8. What is the maximum number of rings all calls should be answered within?	
9. A patient calls the service and does not know the name of their Doctor or Surgery. What could you do?	
10. A mother phones in for her two children. How would you take the call?	
11. How would you deal with a patient who has a language barrier?	
12. How would you log a call back?	

SIGN OFF FOR ASSESSMENT QUIZ

Date:

Staff member (Full name): **Signature:**

Trainer/TL (Full name): **Signature:**