



# HEALTH CARE PROFESSIONAL (HCP) ADMISSIONS



## Information Booklet

## Contents

<b>Page No</b>	<b>Content</b>
<b>1</b>	Index
<b>2</b>	Introduction
	What is a HCP Admission?
<b>2-3</b>	Booking Transport
<b>3</b>	Who is authorised to book HCP Admissions?
	Who is NOT authorised to book HCP Admissions?
	What is the best time of day to book transport?
<b>3-4</b>	What information is required when booking an admission?
<b>5-6</b>	Appendix 1 – NWS Emergency Operations Centres (EOC) Contact Telephone Numbers
<b>7-8</b>	Appendix 2 – Flow Chart for Ambulance Requests by HCPs
<b>9-10</b>	Appendix 3 – Crew Skill Remit

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## 1. INTRODUCTION

This booklet contains information to support Health Care Professionals (HCPs) who require ambulance transport for patients with clinical and mobility requirements who need hospital services that are not available or appropriate in the community.

The information within this booklet will explain procedures associated with HCP calls, and provide information on telephone numbers to be used, ambulance vehicle types and skill remit of ambulance staff.

It is vital that the Ambulance Service is used by HCP for patients who are deemed eligible due to clinical and mobility requirements.

## 2. WHAT IS A HCP ADMISSION?

The Ambulance Service Health Care Professional Admission Protocol is an enhanced clinically appropriate service for the admission of patients, ensuring that any critical clinical conditions are identified early in the question sequence and responded to immediately on blue lights.

It will also enable the Ambulance Service to respond to patients who have a non-life threatening condition and require admission to hospital within a timescale clinically appropriate to their needs as determined by the HCP (i.e. patient to be at their destination within 1- 4 hours) for:

- 1 Increased level of care
- 2 Specialist care and opinion (e.g. cardiology, surgery, specialist clinics etc.).

The HCP booking the ambulance must specify the time. **Do not request “urgent” transport if you require an emergency. Please specify it is an “emergency.”**

The caller should contact the Ambulance Service using 999 or the HCP emergency number for emergency admissions only.

For HCP admissions within a specified time, the number known as the “HCP line” should be used (see **Appendix 1**). This number has priority over calls which come through over our general line number, but not 999 calls.

## 3. BOOKING TRANSPORT

### a) Who is Authorised to Book HCP Admissions?

- Medical Doctor
- General Practitioner
- Nurse Practitioner
- Registered Nurse

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- Paramedic
- Approved Social Worker (Approved Mental Health Professional)
- Clerk/Receptionist (on behalf of Clinician)

**b) Who is NOT Authorised to Book HCP Admissions?**

- Members of the public
- Patients not evaluated by HCP

**c) What is the Best Time of Day to Book Transport?**

Does the patient need ambulance transport? The HCP should give consideration to the patient’s needs, community services available, and services available at the receiving hospital.

Current data states the majority of GP bookings are made between the hours of 1200 and 1500hrs. This may suggest this occurs during the period GPs deal with home visits and / or telephone calls made to patients at home. Operating in this way presents a surge of activity across the region between the hours of 1200 and 1500hrs; this is also a time of peak activity for the Ambulance Service, especially Monday through to Friday.

The booking request needs to be made as soon as it is established that the patient requires transportation to hospital, in particular patient transport request, with the focus being directed to the minimum skill set required (see **Appendix 3**).

**d) What Information is required by the Ambulance Service when Booking an Admission?**

A flow chart is provided at the end of this booklet (**Appendix 2**) to facilitate the booking process. The information listed below is usually requested for HCP admissions:

- 1 Introduce yourself and where you are calling from
- 2 If patient is breathing (or have noisy breathing) and awake
- 3 Phone number of the authorising HCP
- 4 Address to pick up the patient
- 5 Reason for admission (**life threatening conditions may be identified at this point**)
- 6 Patient’s age/gender
- 7 Whether the HCP is with the patient or not

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8 If the condition presents an immediate threat to life

If answered yes, there is an immediate threat to life, you will be instructed: “If there is a defibrillator available, send someone to get it now and tell me when you/they have it”.

If answered there is no immediate threat to life and a 1-4 hour response is required, you will be advised: “We will respond within the next 4 hours unless another resource is available sooner.” (Other timescales can be requested dependent on patient need).

If a 4 hour response is appropriate for the patient, you will be asked: “Would an Urgent Care Service response provided by us be appropriate?”

9 What is the patient’s weight?

10 Is there a clinical reason the patient needs to travel alone?

11 Destination hospital/unit

12 Patient’s name

13 Patient’s contact number

14 Mobility of patient, i.e. Chair/Stretcher/Walking etc.

15 Any escorts travelling with the patient, i.e. Nurse/Carer/Relative etc.

16 Is the patient ready to travel at the time of booking?

*Please note:* After you have made the booking, you may be called back by a Senior Clinician, when demand is high, to assess alternative transport options, should there be other resources suitable for consideration (**Appendix 3**).

***If you require an emergency, it is advisable to ring 999 or the emergency number (see Appendix 1). The emergency numbers listed in Appendix 1, take priority over the HCP number used for booking HCP admissions.***

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## APPENDIX 1

### NWAS Emergency Operations Centres (EOC) Contact Telephone Numbers For Same Day Admissions

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## **NWAS Emergency Operations Centres (EOC) Contact Telephone Numbers for Same Day Admissions:**

### **Cumbria & Lancashire Area**

**01772 867721** Booking transport within a specified time (HCP Line)

**01772 867761** Enquiries about the booking

### **Cheshire & Merseyside Area**

**0151 261 4322** Booking transport within a specified time (HCP Line)

**0151 261 4361** Enquiries about the booking

### **Greater Manchester Area**

**0161 866 0622** Booking transport within a specified time (HCP Line)

**0161 866 0661** Enquiries about the booking

## **Contact Number for HCPs Only When Booking Emergency Admissions:**

### **Cumbria & Lancashire Area**

**01772 867701** – Emergency Admission

### **Cheshire & Merseyside Area**

**0151 261 4301**– Emergency Admission

### **Greater Manchester Area**

**0161 866 0611** – Emergency Admission

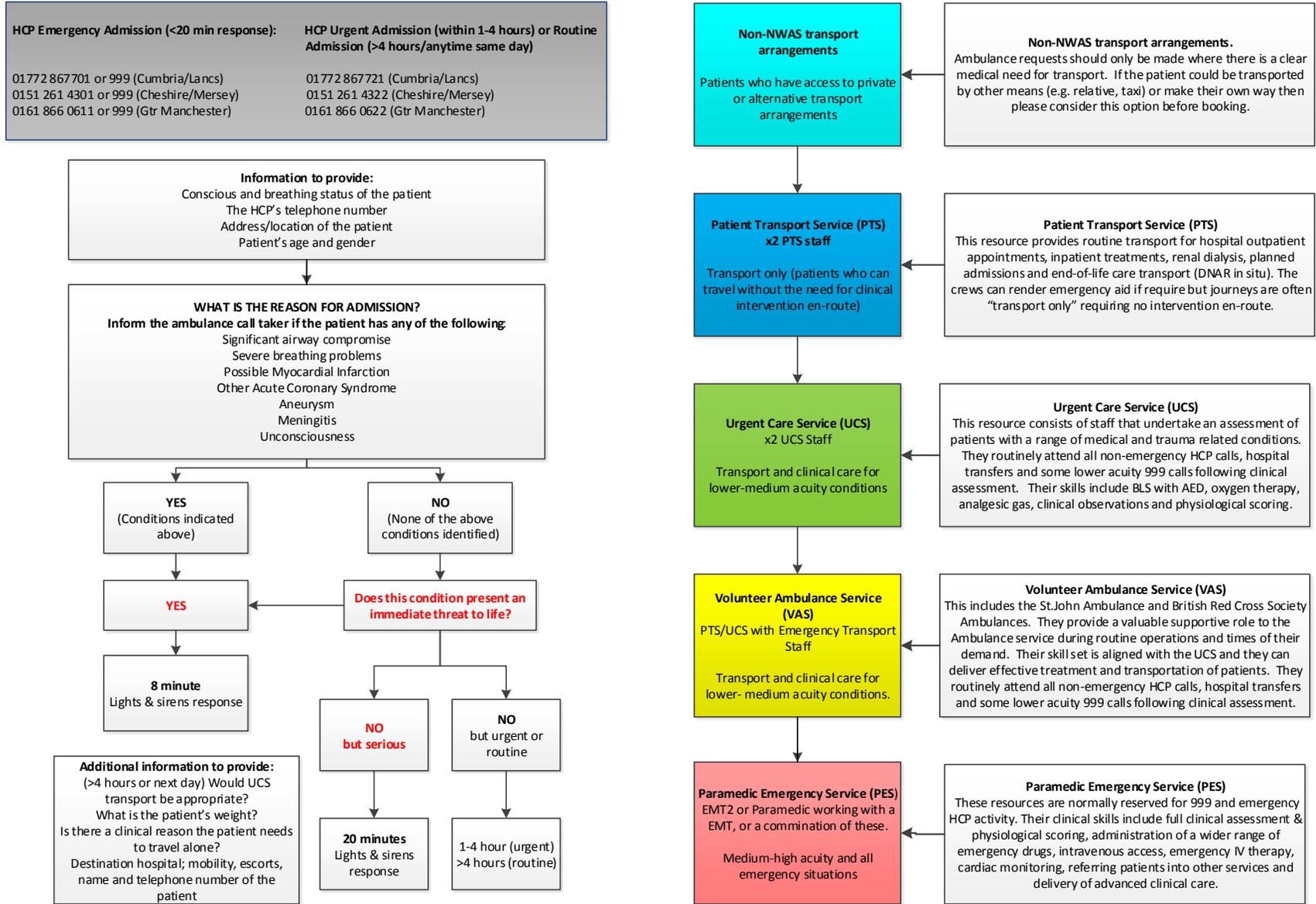
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## APPENDIX 2

### Flowchart for Ambulance Requests by Health Care Professionals

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# GUIDANCE FOR AMBULANCE REQUESTS BY HEALTH CARE PROFESSIONALS



**APPENDIX 3**

**Crew Skill Remit**

**Patient Transport Services (PTS) Skill Remit**

PTS staff are responsible for the care and safe transportation of non-emergency patients. They ensure timely transportation to and from planned treatments, hospital appointments, day centres, treatment centres, unit and other care facilities. The acuity of patients conveyed is classed as transport only i.e. no clinical interventions or treatments are required during the journey. An example of this is palliative care patients with a DNAR in situ, travelling between hospital, home and other care facilities. They undertake a full range of patient transport duties including stretcher work, wheelchair work and patient handling. They will provide first aid and basic life support (BLS) in an emergency situation. This resource is not equipped with blue lights.

**Urgent Care Service (UCS) Skill Remit**

The UCS crew will deliver effective and safe transportation of patients between their homes, treatment centres and other hospital sites as determined by a booking HCP or following clinical assessment by a Paramedic. Their skill remit includes:

- Primary & secondary survey, including clinical observations (e.g. blood pressure monitoring, pulse oximetry, blood glucose, tympanic temperature)
- Physiological scoring using an early warning system
- Adult & Paediatric Basic Life Support with AED skills (including airway adjuncts)
- Basic Emergency drug administration e.g. Oxygen, Entonox, Aspirin, Paracetamol and Oral glucose gel
- Fracture management and wound care skills (e.g. splinting, use of orthopaedic stretcher)
- Skills to support the Paramedic or EMT2 as required

**Volunteer Ambulance Service (VAS) Skill Remit**

The VAS resources that are commonly utilised by NWS include St. John Ambulance and the British Red Cross. The VAS crew will deliver effective and safe transportation of patients between their homes, treatment centres and other hospital sites as determined by a booking HCP or following clinical assessment by a Paramedic. Their skill remit includes:

- Primary & secondary survey, including clinical observations (e.g. blood pressure monitoring, pulse oximetry, blood glucose, tympanic temperature)
- Physiological scoring using an early warning system
- Adult & Paediatric Basic Life Support with AED skills (including airway adjuncts)
- Basic Emergency drug administration e.g. Oxygen, Entonox, Aspirin, Paracetamol and Oral glucose gel
- Fracture management and wound care skills (e.g. splinting, use of orthopaedic stretcher)
- Skilled to assist a Paramedic or Doctor with interventions such as intravenous cannulation and airway management in a cardiac arrest situation

In some situations a Paramedic, Nurse, EMT2 or Doctor may work on one of these resources as part of the crew. In these situations, they will act according to their scope of professional practice.

**Clinical Support to Operational Resources**

All resources have access to senior clinical support via one of these two routes:

- On-duty Advanced and Senior Paramedics: these provide remote support to PES level resources and can respond to the scene to provide support, where required.
- The Urgent Care Desk (UCD): based at two sites, the Specialist Practitioners (Nurses and Paramedics) can provide remote clinical advice to all levels of resource

Our Paramedics and EMT2's use a modified version of the Manchester Triage System (MTS), known as Paramedic Pathfinder, to triage and stream patients in clinical practice into the most appropriate pathway of care. Their assessment using this tool and physiological scoring informs what treatment the patient may receive on assessment, including medication and advice commensurate with their scope of practice. The Specialist Practitioners use a telephone modified version of MTS (52 presentational cards) to provide secondary triage to lower acuity 999 calls and provide clinical support to PTS, UCS, VAS and other operational crews, where required. All staff responding to HCP calls have access to these resources, should they need it upon arrival at the location.

**Emergency Medical Technician Level 1 & 2 Skill Remit**

**EMT1's** will assist in the delivery of high quality and effective pre-hospital clinical care and patient transportation, respond to 999 emergencies under blue light and normal traffic conditions, inter-hospital transfers, urgent hospital admissions and other allocated patient interventions commensurate with their role and responsibilities. They will work as a crew to initiate appropriate care and effective treatment to patients in both hospital and pre-hospital environment, selecting and applying appropriate skills and equipment safely and within their level of training, competency and scope of practice. They offer a range of clinical skills, similar to UCS and VAS, however can undertake emergency driving.

**EMT2's** are able to respond to the full range of emergency, urgent and routine calls under blue light and normal conditions. They may work on Rapid Response Vehicles as well as Ambulances. EMT2's have the following clinical skills in addition to UCS/VAS skills:

- Use of other airway adjuncts as part of BLS and AED (e.g. LMAs)
- Triage and streaming of patients using the Manchester Triage System informed Paramedic Pathfinder tool
- Emergency drug administration: all of the UCS/VAS drugs plus GTN, Salbutamol (nebulised), Ibuprofen, Adrenaline 1:1000 for anaphylaxis, Naloxone (IM) and Glucagon (IM)
- 12-Lead ECG and ability recognise a wider range of rhythms, including Acute Myocardial infarction and access to PPCI.
- Ability to recognise patients who should be streamed into suitable pathways including PPCI, hyper acute stroke care, major trauma centres, GP acute visiting schemes, community care pathways and self care pathways
- Arrange suitable non-emergency transport for patients when responding on a rapid response unit
- Be able to recognise death and manage the bereaved relatives
- Fracture management, immobilisation and extrication skills
- Emergency childbirth management
- Skilled to assist a Paramedic or Doctor with interventions such as intravenous cannulation and airway management in a cardiac arrest situation

**Paramedic Skill Remit**

Paramedics provide clinical assessment and treatment at point of first contact by attending to patients in a variety of clinical and non-clinical settings, according to patient need. They provide treatment in accordance with Joint Royal College Ambulance Liaison Committee (JRCALC) guidance and agreed Trust policies. Paramedics will evaluate information from a clinical examination and can refer patients into appropriate care settings, provide self care advice and treat patients at home, according to their defined scope of practice. **They provide the following skills in addition to that of an EMT2:**

- Advanced Life Support provision (Adult & Paediatric), including manual defibrillation, endotracheal Intubation and LMA insertion.
- Intravenous cannulation and delivery of defined IV medications
- Emergency needle cricothyroidotomy and needle thoracocentesis
- Triage and streaming of patients using the Manchester Triage System informed Paramedic Pathfinder tool
- Drug administration: all of the EMT2 drugs plus advanced cardiac life support drugs, morphine, diazepam (for seizure termination) and a range of other medications as per agreed Trust policies.
- Streaming of patients into suitable pathways including PPCI, hyper acute stroke care, major trauma centres, GP acute visiting schemes, community care pathways and self care pathways

Senior Paramedics and Advanced Paramedics within the Trust have a wider skill remit and often operate on Rapid Response Vehicles.