System CAS Handbook

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# System Clinical Assessment Service (SCAS)

The 'System Clinical Assessment Service (CAS)' launched on 1st December 2021. This innovative, service was in the planning for many months and has included ground-breaking work to enable clinicians from EDs, Paediatrics, Mental Health, General Practice and Sirona to come and work alongside us, Severnside, on our Adastra platform, and form the new ‘System CAS’. The 'System CAS' operates from Osprey Court, initially on weekdays until 10pm. The clinical team and shared expertise in the System CAS 'hub' provides a rich opportunity to support clinical decision making, and ensure patients receive the right care first time.

To begin with, System CAS clinicians focused on patients who would otherwise be directed to hospital or 999 by NHS Pathways. The System CAS clinicians will phone these patients back to fully assess their clinical need and ensure that people are sent to hospital or an ambulance when these are the only options to meet that need. However, many patients can be safely cared for over the phone or with face-to-face assessment with Severnside, their own GP, the Urgent Treatment Centre (UTC) or Minor Injuries units (MIU). Over time, we anticipate the System CAS will grow and further expand the opportunity to remotely assess patients who would otherwise attend ED unnecessarily. Some of the future plans for System CAS work is detailed later in this document.

System CAS ‘Perfect Weeks’ have run in February & March 2022. The aim of the Perfect Weeks are to understand the impact of a well-resourced System CAS, with some of the future elements being implemented (either as short pilots or launch) for these periods.

# What are the System CAS objectives?

The System CAS is an innovative collaboration. It builds upon the successful Severnside Integrated Urgent Care (IUC) CAS, which launched in April 2019. Its purpose is to meet patients’ urgent care needs efficiently and effectively, by optimising joint working, shared expertise, risk-holding and remote assessment.

The System CAS is a collaborative project, involving the following partners:

* Avon & Wiltshire Mental Health Partnership (AWP)
* BrisDoc Healthcare Services
* BNSSG Clinical Commissioning Group (CCG)
* General Practice (supported by One Care Ltd)
* North Bristol Trust (NBT)
* Practice Plus Group (PPG)
* Sirona Care and Health
* University Hospitals Bristol and Weston (UHBW)

System CAS clinicians will manage the following case types:

* ED Cases
* 999 Cat 3 & 4
* Mental Health
* Children’s ED Advice Line
* Minor Injury
* UTC Remote Assessment

The partners will work together to:

* Deliver safe, effective, high quality, collaborative patient care
* Monitor, improve and evolve community based urgent care services
* Deliver best value

# System CAS Leadership

The System CAS is hosted by BrisDoc and sits within the Urgent Care structure.

Clinical leadership is led by Dr Anne Whitehouse and Dr Chris Dykes, Deputy Medical Directors, supported by Dr Louise Whyte, Clinical Lead.

Operation Leadership is led by Lucy Grinnell, Head of Integrated Urgent Care, supported by the Service Delivery Team.

System CAS Co-ordinator – Laura Hardidge

# System CAS Structure

The System CAS will operate within the infrastructure of Severnside IUC. This includes co-location at Osprey Court, access to the full range of IT systems available in Severnside, including the option to receive photos, video consult and electronically prescribe if required, as well as the operational support and leadership.

The next section explains each element of the System CAS in more detail. The quick reference table below contains links to the relevant section.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Origin | Demand management | Case type | Queue | Clinicians  |
| NHS111 | DoS | [ED Case](#_ED_CASES) | System CAS Remote Assessment (and IUC Advice)  | Severnside, General Practice, ED Clinicians, Paediatrician, Minor Injuries |
| NHS111 | SCAS/PPG email/telephone | [999 Case](#_999_CASES) | System CAS Remote Assessment (and IUC Advice) | Severnside, General Practice, ED Clinicians, Paediatrician, Minor Injuries |
| NHS111 | DoS | [AWP Advice](#_Mental_Health) | AWP Advice queue | AWP  |
| Health Care Professional Line telephone call |  | [Children’s Advice Line](#_Paediatric_Lines) | UTC Advice  | Paediatricians |
| NHS111 | DoS | [Minor Injuries](#_Minor_Injuries) | Minor Injuries queue | Sirona (Perfect Weeks only) |
| NHS111 | DoS | [UTC](#_UTC_Remote_Assessment) | Cases land direct into UTC’s Adastra | Sirona  |

## Shift Manager role

The Shift manager has a key role in the smooth successful running of the System CAS. The Shift Manager role is to provide the same operational leadership and support as they would within Severnside, including:

* Troubleshooting any issues for the System CAS team; both operational and clinical
* Managing demand and capacity including DoS profiles for ED, 999, Minor Injury and AWP cases
* Managing performance for the System CAS and implementing any safety measures and mitigations, when required
* Supporting the call handling teams with answering calls, queries and safety calling
* Ensuring all processes are understood and followed

## Call Handlers

The call handlers’ main responsibilities include taking incoming calls and carrying out safety calling when required. Call handlers will also support the shift manager when needed and carry out admin tasks when capacity allows, such as, supporting with PSQ admin

## ED CASES

These are cases that have resulted in an ETC (Emergency Treatment Centre) disposition from NHS111. When operational the System CAS will return on the DoS (Directory of Services) for referral as an alternative to ED for these patients to prevent avoidable ED attendances.

Four services are available on the DoS for ETC dispositions;

* 1. UTC/MIU (for appropriate patients – See [UTC section](#_UTC_Remote_Assessment) for more information)
	2. System CAS
	3. PPG Validation
	4. ED

Services will return in the above order, except where UTC/MIU is not appropriate in which case System CAS will be the top-ranking service.

### Adastra location

Clinicians will log in using the location appropriate for the service they are working on behalf of:

|  |  |
| --- | --- |
| **Provider** | **Adastra location** |
| General practice  | System CAS – General Practice |
| Severnside | Osprey Court |
| NBT ED | System CAS - NBT |
| UHBW ED | System CAS - UHBW |
| Paediatric clinician | System CAS – Children’s |
| AWP  | System CAS – AWP |
| Sirona  | System CAS – Sirona |

### Shift Management

The Shift Manager will manage the demand flow for this service via the System CAS ED DoS profile (see DoS Management Section of the Shift Manager Handbook for more information).

ED Cases will land in the **System CAS Remote Assessment** queue. This queue is visible for all System CAS locations in Adastra under the **System CAS menu**. ED Cases are also mirrored in the Severnside IUC Advice queue.

ED Cases DX codes are; DX02, DX03 and DX89.

## 999 CASES

999 cases that have resulted in a CAT 3 or 4 ambulance disposition from NHS111. When operational, the System CAS will receive 999 cases as an alternative to an ambulance to prevent avoidable ambulance/ED attendances. 999 cases take priority over ED cases should we need to make this decision.

### Adastra location

Clinicians will log in using the location appropriate for the service they are working on behalf of:

|  |  |
| --- | --- |
| **Provider** | **Adastra location** |
| General practice  | System CAS – General Practice |
| Severnside | Osprey Court |
| NBT ED | System CAS - NBT |
| UHBW ED | System CAS - UHBW |
| Paediatric clinician | System CAS – Children’s |

### Shift Management

The Shift Manager will manage the demand flow for this service by communicating with the PPG Real Time Team (RRT). 999 cases take priority over ED cases.

When the System CAS is operational cases will be sent electronically from PPG’s RRT at the Shift Manager’s request. The Shift Manager will contact the RRT via telephone and email to advise the System CAS is open to 999 referrals.

999 Cases will land in the **System CAS Remote Assessment** queue. This queue is visible for all System CAS locations in Adastra under the **System CAS menu**. Cases are also mirrored in the Severnside **IUC Advice** queue.

999 Cases DX codes are; DX331 and DX333.

## Mental Health

The AWP Clinicians will be working very closely with the Severnside team and will pick up both System CAS and Severnside work. Currently Mental Health clinicians work Saturday and Sunday 08.00 – 20.00, co-locating at Osprey Court.

### Adastra location

The clinicians will log in as the Adastra location – **System CAS - AWP.**

### Shift Management

The Shift Manager will manage the demand flow for this service via the AWP Mental Health DoS profile (see DoS Management Section of the Shift Manager Handbook for more information).

Following NHS111 Pathways assessment, cases with a mental health outcome will land directly from NHS111 into Adastra. These cases will be in the **AWP advice** queue with an **AWP** case type.

### AWP Clinicians

As well as the AWP cases, the Mental Health team will also review both the Severnside **IUC Advice** and **System CAS Remote Assessment** queuesfor patients appropriate for them to manage or add input. The Severnside IUC advice queue should have potential cases tagged with the Mental Health case tag, ready for the AWP team to review. These cases will be moved to the **AWP queue** by the Mental Health team with a case type of **AWP Advice Follow Up.**

The Mental Health team will identify a case as appropriate and consult the patient in the usual way. If they deem a tagged case to not be appropriate, they will remove the tag for Severnside clinicians to manage as usual in the IUC advice queue.

Alternatively, they may add additional notes to a case to enhance the information available for the consulting Severnside clinician. This information will be added via a ‘**comfort call’** note in Adastra. For example, a patient may land in the IUC advice queue with a physical complaint, but the patient is known to the AWP team. In this scenario the AWP clinicians can add any important relevant information to the Adastra case via a **comfort call** note. The Severnside clinician will then have access to both the NHS111 notes as well as the additional relevant mental health history to support them with their consultation.

The Mental Health team included two Senior Associated Practitioners, and one Mental Health Clinical Co-Ordinator (MHCC). Calls managed by the Senior Associated Practitioners will have oversight from the MHCC. The Senior Associated Practitioners will complete the consultation in Adastra and forward the case back to the **AWP queue** by select the **current** case type. The case will land back in the **AWP queue** for the Senior Associated Practitioners to add a **MHCC review case tag.** The MHCC will manage the cases with a **MHCC review case tag** and complete the case, or, add/pass back for additional input.

For full details of roles and responsibilities, please see Mental Health Clinical Assessment Service SoP.

### Mental Health Clinical Co-Ordinator

As Mental Health specialists working within the service, this specialist advice and support can be offered to Severnside clinicians in the same way as the Clinical Co-Ordinator. The Shift Manager should promote the access to these clinicians via MOTD and in their welcome message.

The Mental Health team may also seek advice and support from the Severnside Clinical Coordinator if their mental health assessment has identified physical health concerns and/ or the need for a prescription.

## Minor Injuries

The first Minor Injury pilot is planned for the ‘Perfect Week’ w/c 28th February 2022 for one week only. A second pilot week is planned although date is to be confirmed.

The aim is to provide a remote assessment service for minor injury patients when the UTC/MIUs are closed during the week, and as additional support on a weekend, to understand if this prevents avoidable ED attendances. The pilot is scheduled to run 18:00-23:00 hours Monday to Friday, and 14:00-23:00 hours Saturday and Sunday at Osprey Court. Referrals will be from NHS111 according to the minor injuries OOH DOS profile. Sirona clinicians with injury +/- illness expertise will manage these cases.

The second pilot week (date to be confirmed) will take 111 referrals as above, plus referrals from the ED Streaming Tool (EDST) according to the EDST DOS. This pilot week will therefore test the role of remote clinical assessment for unheralded patients presenting at ED with minor injuries.

### Adastra location

Sirona clinicians will log into Adastra using the location – **System CAS - Sirona**

### Shift Management

The Shift Manager will manage the demand flow for this service via the Minor Injury DoS profile (see DoS Management Section of the Shift Manager Handbook for more information).

These cases will come via NHS111 for cases where the Minor Injury service is appropriate for the patient’s needs. The Minor injury cases will land in the **Minor Injury** queue with a **Minor Injury** case type.

### Minor Injury Clinicians

The Minor Injury clinicians will manage the **Minor Injury** cases in the **Minor Injury** queue. Where capacity allows, clinicians able to manage illness can also contribute to the ED and 999 Cases in the **System CAS Remote Assessment** queue.

### Minor Injury booking

For patients requiring face to face assessment, the clinician will be able to

* refer to ED if face to face assessment is required during the out of hours period, or
* advise the patient to attend an MIU or UTC the following morning if that timeframe is clinically safe for the patient

If a clinician deems it appropriate to hold the patient overnight and direct them to attend a MIU/UTC the next day, the clinician can advise the unit by sending the patient notes to a receiving NHSmail inbox. This means the patient will be expected by the unit the following morning.

Clinicians advising a patient to attend MIU/UTC the next day will need to send a referral using the **Agency Referral** button on Adastra. The **Agency Referral** button is located on the **Current Consultation** screen.

1. Select **Agency Referral**
2. Select the required unit to send the patient notes
3. Press **select**
4. Add note and press **OK**
5. Continue with the consultation. The email will be sent to the receiving unit on completion of the consultation.

Clinicians should advise the patient to attend at the relevant MIU/UTC between 09:00-12:00 hours the next day. Clinicians should support this by sending the following template text message to the patient at the time of the System CAS consultation

* *“This text confirms that you had a clinical consultation in the System CAS, and you have been advised to attend XXXX MIU/ UTC between 9am-12pm. Please show this message when you arrive at reception and advise that the notes from our consultation this evening have been sent to them.”*

Clinicians referring a patient to ED will need to do so via **Agency Referral** following the above process and selecting the relevant ED department.

For the purpose of the pilot the Minor Injury clinicians will not complete the PaCCs training.

##

## Children’s ED Advice Lines

Healthcare professionals in the community can call Children’s ED for specialist advice about children with urgent paediatric problems. When there is paediatric clinician cover the Children’s ED Advice line will be redirected to the System CAS call handlers.

### Adastra location

Pediatricians will log into Adastra using the location aligned with their employing organisation to begin with:

* Paedatric clinician – **System CAS – Children’s**

Adastra updates are planned to include a paediatric clinician location.

### Shift Management

The Shift Manager will be responsible for ensuring the Children’s ED line has been diverted to the System CAS at the beginning of the paediatric clinician’s shift. They will also check the divert has been deactivated when the paediatric clinician has finished.

Calls will route to the System CAS Call Handlers who will take the demographics and add the case to the **UTC Advice** queue with a case type of **UTC Advice**.

There will be a specific case question at the end of the Adastra consultation to capture data relating to the need for children’s SDEC pathways.

### Children’s ED Referrals

\*\*From Monday 18th July we will be running a pilot of Careflow Connect for referral of patients to Children’s ED for the peadiatric team in System CAS only. Information for this can be found in the document ***UHB Careflow Connect SOP v1*** on Radar\*\*

Outside of this pilot, Clinicians referring a patient to Children’s ED will need to send their consultation notes via **Agency Referral**. The **Agency Referral** button is located on the **Current Consultation** screen.

1. Select **Agency Referral**
2. Select **Children’s ED**
3. Press **select**
4. Add note and press **OK**
5. Continue with the Adastra consultation. An email will be sent to the receiving unit on completion of the consultation.

## UTC Remote Assessment of ETC dispositions

The Urgent Treatment Centre (UTC) in Hengrove receives cases from NHS111 for remote clinical assessment on the Sirona/ UTC Adastra platform. In the same way ED Cases are received into the System CAS, the UTC receive ETC (and primary care) dispositions into the remote assessment queue on Sirona’s Adastra platform.

These clinicians form part of the System CAS and are co-located at Osprey at the weekends.

Underpinning the final ETC disposition are symptom groups and discriminators; this is the information used by the DoS to return the appropriate service for the patient. Not all symptom groups and discriminators within an ETC disposition are appropriate for UTC/MIU referral.

Four services are available on the DoS for ETC dispositions;

1. UTC/MIU
2. System CAS
3. PPG Validation
4. ED

Services will return in the above order, except where UTC/MIU is not appropriate in which case SCAS will be the top-ranking service.

ED Cases DX codes are; DX02, DX03 and DX89.

### Adastra location

This work is carried out using Sirona’s Adastra platform.

### Shift Management

Demand is managed by Sirona using Sirona’s ETC remote assessment DoS Profile.

# System CAS Workstreams in the pipeline

## EDST (ED Streaming Tool)

EDST is a nationally mandated system to be implemented in all ED’s across the country. EDST is a tool similar to NHS111 online.

Unheralded patients (those who have not been transferred by ambulance or advised to attend by NHS1111/community HCP) who arrive at ED will be asked to complete an EDST online assessment. EDST will provide the patient with a recommendation of the service best suited to meet their needs.

In some circumstances the service will be the System CAS. These cases will land in the **System CAS Remote Assessment** queue with an **EDST case type**.

***This service is not currently live, however it is actively being worked up.***

# Change Register

Content of document

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Version** | **Author** | **Change** |
| Feb 2022 | 1 | L Grinnell | Created  |
| 17/05/2022 | 1.1 | N Ryan  | Addition of Takelist instructions and review of content  |