Advice on seeking Urgent & Emergency Care from SECAmb

This document is intended to provide support and guidance to staff in care homes (nursing & residential) when a resident has an acute medical problem or injury. It is also designed to offer support to safely assist a resident off the floor following a fall when it is safe to do so. Calling 999 should be used only for when there is a true (life, limb or sight threatened) emergency. Many other urgent healthcare needs can also be dealt with by the ambulance service, however the most appropriate route to access this help if appropriate; is by calling NHS111*6 ie. for a resident who has fallen, with or without injury, and requires assistance. Situations can quickly escalate and staff in care homes want the very best for their residents. South East Coast Ambulance Service (SECAmb) is committed to ensuring the best possible service to our population and by providing guidance on who to call, and when, we can work together to ensure that calls for help are directed appropriately to the service best placed to assist.

There are two sections in this document. The first section looks at the important points to remember when considering calling for assistance, and the best practice when actually calling 999/111*6. The next section is a flow chart to assist with rapid decision making in the event of an incident involving your resident. The flowchart is not intended to be exhaustive, rather is it intended to give an indication of what you can do in the event of problem with a resident. However, you are advised to err on the side of caution if you are in any doubt - call 999.

Points to remember when considering calling for assistance

- ✚ Consider contacting the GP or local community Rapid Response team to get support if active treatment or a hospital admission is not expected.
- ✚ Complete the RESTORE2 document to obtain the NEWS2 score and SBARD (if training completed)
- ✚ How long has the resident had the problem? If they are ill, are they getting worse, or just not getting better?
- ✚ Do they have an Advance Care Plan? What is their preferred place of care/death?
- ✚ Do they have a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) order or Recommended Summary Plan for Emergency Care & Treatment (ReSPECT)?
- ✚ Is it clear that the only option is to go to hospital? (e.g. broken hip)
- ✚ What is your expectation of calling 999 or 111*6? If it is not for active treatment/hospital admission, is 999 needed, or is a GP/Out-of-Hours GP advice/visit more appropriate?
- ✚ Have you asked the resident (if they have capacity) or contacted family if the resident lacks capacity to discuss the best course of action? (time/urgency permitting)
- ✚ Do not pack the resident's bag or write the transfer letter prior to considering calling 999/111*6.

Points to remember when actually calling 999 or 111*6

- ✓ The person calling should be the person looking after the patient. Wherever possible, try to use a phone (such as a cordless phone or mobile) next to the resident's side. Delegating the call to someone else or calling from an office in another part of the home means SECAmb will have less access to detailed information and is likely to delay an accurate assessment of the resident's condition. This means we will be limited in considerations of a best response (for instance; an Ambulance or a Specialist Paramedic in a response car).
- ✓ Have the resident's relevant information to hand such as DoB, medical notes, medications, special care notes
- ✓ Locate any Advanced Directives, such as care plans, DNACPR orders or ReSPECT documents, unless the resident's condition is time critical, in which case do not delay the call to locate these documents.
- ✓ Answer all the questions given as best as you can. These may sometimes not seem relevant, particularly if you are a registered Healthcare Professional, but they are vital is deciding on the right level of response. If you do not understand a question that the call-handler asks, politely ask them to clarify.

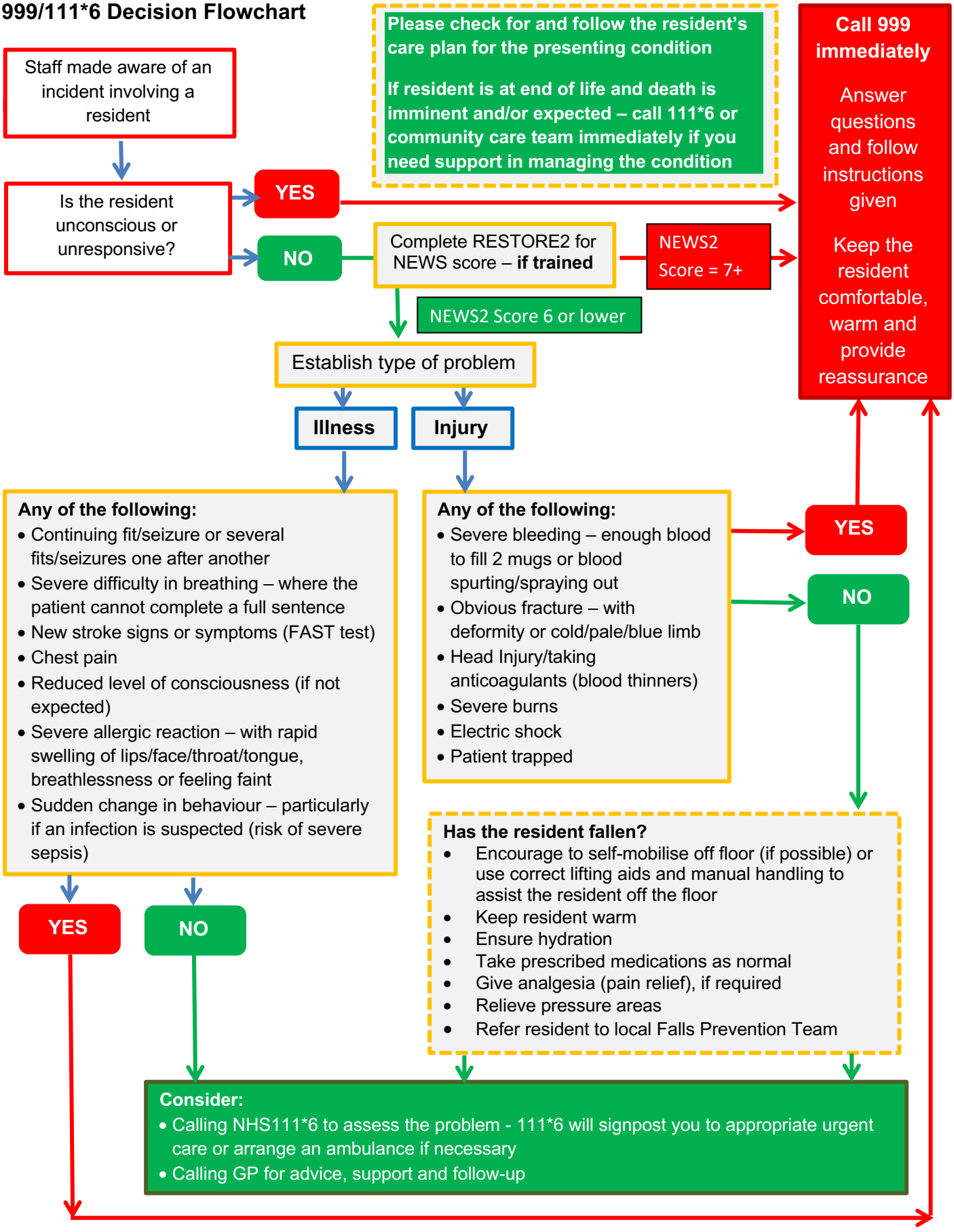
When SECAmb arrive

- ✓ Take the clinician/crew to the resident's side – do not bring the resident to reception

✓ Where appropriate, ensure that the resident is included in decision making about their care. In many cases, transport to hospital will not be necessary, if your expectation is different, please discuss with the SECAmb staff and work together to develop the best plan for the resident.

- **999** should be called if there is an actual or potential **emergency (life, limb or sight threatened)**
- **111*6** should be called if there is an **urgent** need where you need help fast, but it is not an emergency. You can also call 111*6 if you are unsure (consider suitability for calling GP on bypass number)

999/111*6 Decision Flowchart



Additional Area Guidance – East Surrey Place

CARE HOMES CAN ACCESS CLINICAL ADVICE IF NOT LIFE THREATENING OR IF UNSURE VIA:-

1) Care Home GP Practice lead during surgery opening hours or local Community Services during working hours.
2) **All Care Homes** - 111*6 Care Home line is available 24/7. This provides access to clinical support, OOHs GP support and referral to 999 if required.
3) **Urgent Community Response** : For rapid response services operating 8.00am-6pm 7 days a week contact on 01737 775475. For overnight referrals 6pm - 6.30am contact on 07789 504862.