

Extended Access Training Guides

Support: mbpcc.extendedaccess@nhs.net

Consulting Guide (GP, ANP, Nurse)

Remote consultation

The extended access services uses EMIS remote consultation as the system for recording consultation data. This means that all data is entered into the registered practice EMIS system rather than the MBPCC EMIS system you log into to access the appointments.

The way in which you change appointment status and enter a consultation and prescribing will be familiar with the main difference being that an instance of the registered practice EMIS system will be launched when you 'send in' a patient from the appointment book.

Limitations

Third party products do not function in remote consultation. This means you cannot use EPS or partner products such as Accurx in the registered practice EMIS system. See later in this guide for workarounds to these limitations.

Appointment Book Processing

There are two different flows depending on whether the appointment is a telephone/video consultation or face to face.

Telephone/video

Press S to mark your call as started.

Press M to launch the remote EMIS system and record your consultation.

Once done, save the consultation and close the remote system.

Press T to mark your call as ended.

Face to face

Press A to mark patient arrived.

Press S to send patient in (start consultation).

Press M to launch the remote EMIS system and record your consultation.

Once done, save the consultation and close the remote system.

Press L to mark the patient as left.

Consultation notes

You should record your consultation as normal. The extended access service may carry out quality audits in line with the RCGP audit toolkit. This audits the quality of consultation records in line with eleven criteria. You should have regard to the following when creating consultation notes:

- Reason for appointment and patient expectations;
- Any emergency or serious situations;

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- Appropriate history taking, including social and other relevant history;
- Details of assessments performed with findings, including offer/use/declination of chaperones;
- Differential diagnoses and advice given to patient;
- Involvement of patient in decision making and provision of self-help materials;
- Appropriate management decisions and need for any further investigations;
- Appropriate prescribing, use of generics, adherence to formulary and local guidelines;
- Appropriate safety-netting including follow up where required;
- An indication that safeguarding was considered and further details recorded where relevant.

Video consultations

Our system of choice for video consultation is Accurx. Due to technical hurdles using the installed Accurx applet with remote consultation, we recommend you use the web-based version available at <https://fleming accurx.com/login>. This will allow you to locate patients and initiate video calls directly on the website without needing any installed software.

Prescribing

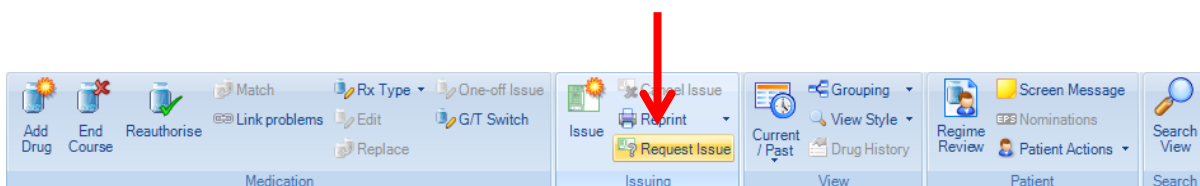
When making prescribing decisions you should have regard to national and local guidelines. You will be able to issue, edit and reauthorise existing medications in patient records, as well as initiate new acute and repeat items. All prescriptions will be printed on paper so for consultations undertaken by telephone or video the patient will need to attend site to collect their prescription.

Where the patient is unable to attend and it is clinically appropriate for the prescription to be delayed until their registered practice is next open, the following workaround can be used to allow the prescription to be issued via EPS.

EPS workaround for non-urgent prescriptions

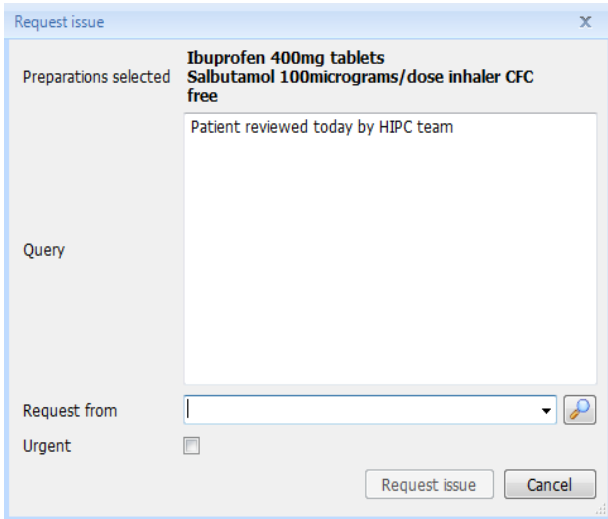
This must be done whilst in the remote practice system.

Add any new medications as normal but do not issue them. Once complete, select all the items that you want to issue from the medications list and then click Request Issue on the toolbar.



An approval box will appear showing the selected medications. In the Query box you should enter who you are and how you have consulted the patient. Your consultation will be visible in the


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patient record so you do not need to repeat full clinical history, though some brief clinical indication for the request would be helpful to the practice.

Once complete, click the Request Issue button. This will join the practice's normal request queue. If urgent, please contact the practice to expedite the approval and the pharmacy to prepare the

delivery. The request will sit with the practice until approved.

Any item requested will be tagged with the request symbol () until approved. There will also be a task for the request visible in the patient's diary.

Referrals

If you make a clinical decision that the patient requires referral for investigations or specialist opinion then you need to include a referral letter as part of your consultation notes. It is not possible for the extended access service to use ERS or create and send referrals directly. All requests for referral need to be documented for action by the registered GP practice.

If you have documented a referral or investigation need then please ensure you send a task to the registered practice alerting them that action is required. Information on how to send cross-organisational tasks is included later in this guide.

Pathology tests

Due to specimen collection arrangements it is not generally possible to carry out pathology test requests 'on demand'. This means if you make a clinical decision that pathology tests are required you must refer the patient back to their registered practice to arrange a suitable appointment for the sample to be collected. The practice may either arrange an appointment for the patient during core hours or book them into an HCA session at a convenient extended access site.

You should stress to the patient the importance that they telephone their registered practice to make arrangements for their tests to be carried out.

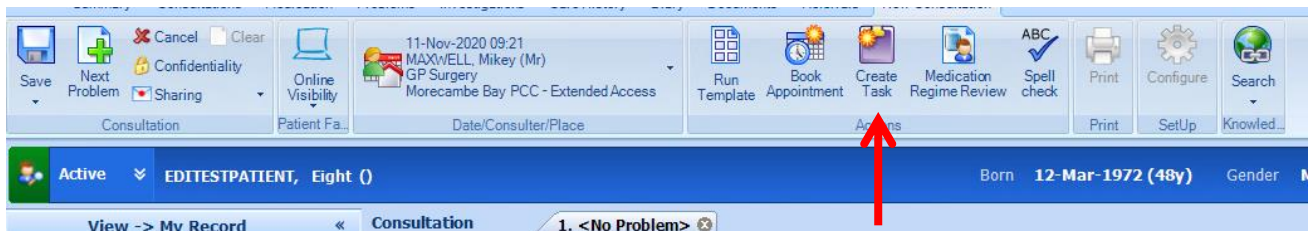
Sharing information

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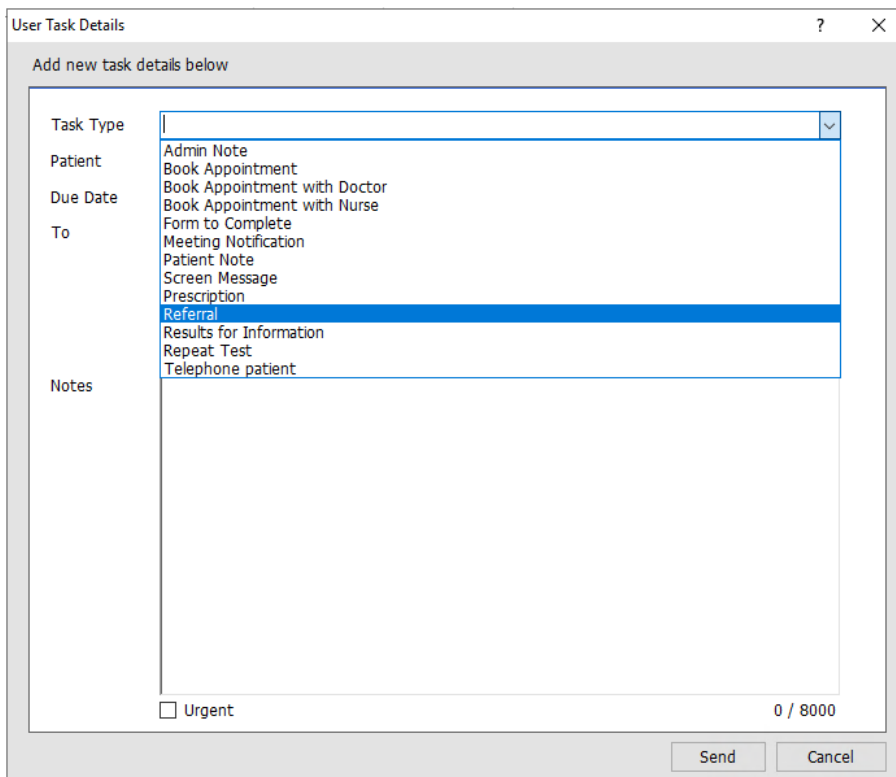
The registered practice may not routinely review a patient record until they next make contact with the practice directly. It is therefore not sufficient to only record any concerns in the consultation as this does not guarantee they will be seen in a timely manner. If you feel it appropriate to alert the registered GP to something then you should send a cross-organisational task to ensure your concerns are acted upon.

Sending tasks

You can send tasks directly from within your remote consultation. Click Create Task on the toolbar whilst your consultation is open.



The patient details should already be completed. Fill in the remainder of the task details.



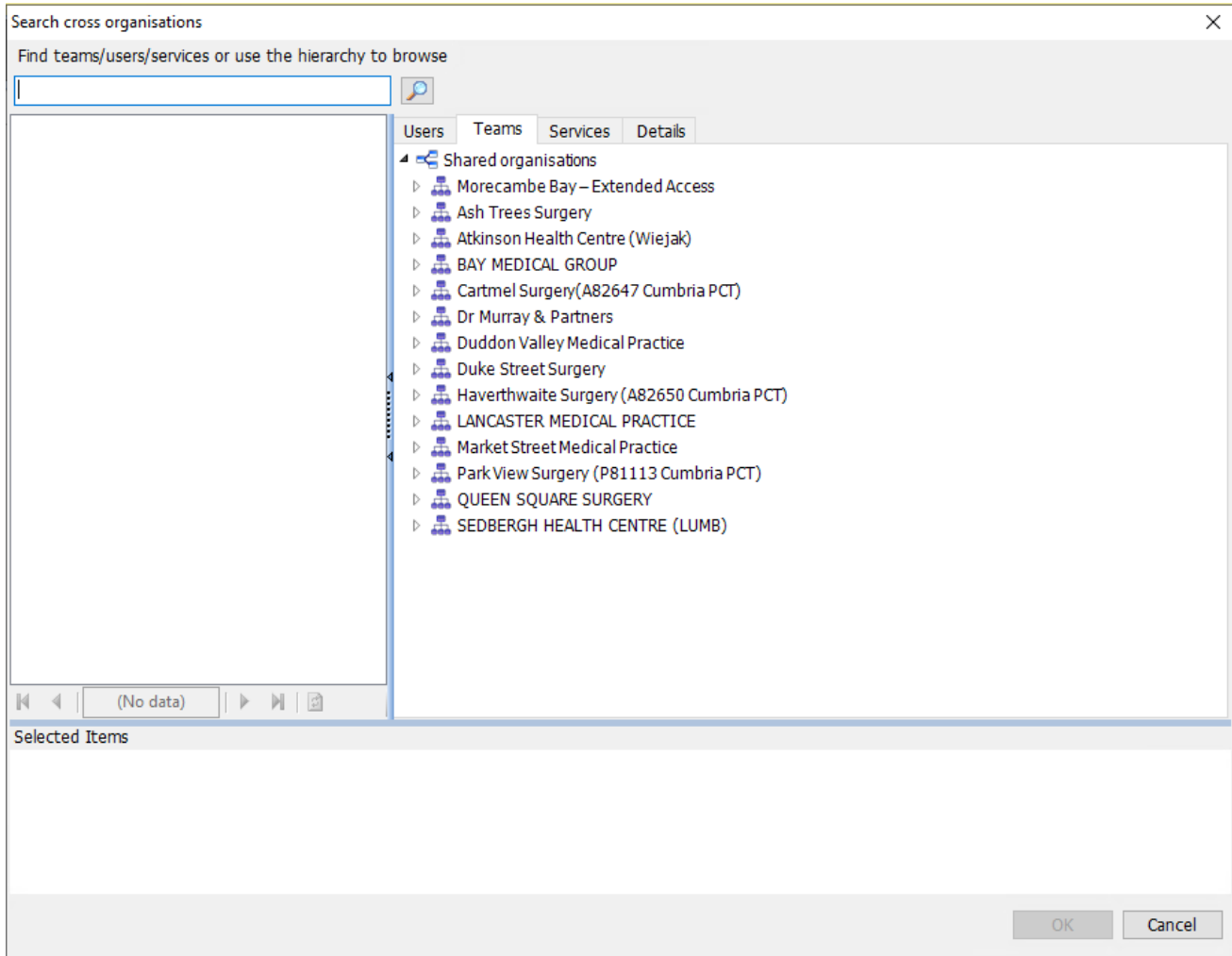
The 'User Task Details' dialog box is shown. It has a title bar with a question mark and a close button. Below the title bar, it says 'Add new task details below'. The main area contains a 'Task Type' dropdown menu, a 'Patient' dropdown menu, a 'Due Date' dropdown menu, a 'To' dropdown menu, and a 'Notes' text area. The 'Task Type' dropdown is currently open, showing a list of options: 'Admin Note', 'Book Appointment', 'Book Appointment with Doctor', 'Book Appointment with Nurse', 'Form to Complete', 'Meeting Notification', 'Patient Note', 'Screen Message', 'Prescription', 'Referral', 'Results for Information', 'Repeat Test', and 'Telephone patient'. The 'Referral' option is highlighted. At the bottom of the dialog, there is a checkbox for 'Urgent' and a character count '0 / 8000'. 'Send' and 'Cancel' buttons are at the bottom right.

Choose an appropriate task type from the dropdown list.

Click the magnifying glass next to the To box to search for the registered GP.

For clinical safety reasons, tasks should always be sent to a Team rather than an individual. This helps to avoid any single point of failure for a task not being actioned.

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The screenshot shows a software window titled "Search cross organisations" with a close button (X) in the top right corner. Below the title bar is a search bar with the placeholder text "Find teams/users/services or use the hierarchy to browse" and a magnifying glass icon. Below the search bar are four tabs: "Users", "Teams", "Services", and "Details". The "Teams" tab is selected. The main area displays a list of "Shared organisations" with a small chevron icon to the left of each name. The list includes: Morecambe Bay – Extended Access, Ash Trees Surgery, Atkinson Health Centre (Wiejak), BAY MEDICAL GROUP, Cartmel Surgery(A82647 Cumbria PCT), Dr Murray & Partners, Duddon Valley Medical Practice, Duke Street Surgery, Haverthwaite Surgery (A82650 Cumbria PCT), LANCASTER MEDICAL PRACTICE, Market Street Medical Practice, Park View Surgery (P81113 Cumbria PCT), QUEEN SQUARE SURGERY, and SEDBERGH HEALTH CENTRE (LUMB). At the bottom of the list is a "Selected Items" section which is currently empty. At the bottom right of the window are "OK" and "Cancel" buttons.

You can view the available teams for any practice by clicking the small chevron to the left of their name in the list. Pick the appropriate team by double clicking so it moves to the Selected Items section at the bottom then click OK.

In the Notes pane, type your message to the Team. If appropriate, tick the Urgent box and when you are happy click Send.