



24th September 2015

Dear Colleague,

RE: Changes to referral pathways to hospital for General Practitioners and other Health Care Professionals

The London Ambulance Service (LAS) is working to improve the current arrangements for transporting patients who have been seen and referred to hospital by their GP or a community Health Care Professional (HCP) to hospital or other health care settings.

Over the past 3 years the number of HCP requests for ambulance transport has increased considerably. Last winter LAS recognised that the response to these patients was, at times, significantly delayed, meaning patients arrived at Emergency Departments or Assessment Units when definitive investigations could not be undertaken and possibly resulting in unnecessary admissions to an acute hospital bed.

In order to address this need LAS has been supported with funding to develop a Non-Emergency Transport Service (NETs). These non-emergency ambulances all have stretchers and oxygen capability as well as analgesia and the crews are trained in lifting and handling.

We believe that the introduction of this service will enable us to provide a better response for those patients who need conveyance to hospital under non-emergency conditions and / or palliative care patients.

We recognise that some patients who have accessed urgent care are very unwell and require emergency transport to hospital, but there are a large number where no clinical intervention is required en-route but, for mobility reasons, they require transportation. These patients would be suitable for either arranging their own transport or a non-emergency transport ambulance or LAS arranged car.

In order to ensure LAS assign an appropriate clinical response for your patient, we are re-introducing a dedicated HCP desk which will have a dedicated direct dial telephone number 24 hours a day which will be staffed by specially trained call handlers with senior clinical support during peak hours. We would ask you please to share this number with your HCP colleagues and use it for patients with the specific requirements outlined in this letter. Please do not share this number with patients or members of the public.

This HCP desk will be in the LAS Emergency Operations Centre and staffed from 09:00 hours to 21:00 hours, 5 days a week from Autumn 2015.



The new LAS telephone number for HCP admissions is:

0203 162 7525

Immediately life-threatening conditions:

If your patient has an **immediately life-threatening condition** e.g. cardiac chest pain, new onset stroke (within 4.5 hours), severe asthma then you should still call 0203 162 7525 and when asked if the call is 'immediately life threatening' you (or your delegated caller) must say **YES** .

Answering YES to this question will activate a category A (8 minute response) and as the call has come from an HCP it will take priority over other category A calls. We recognise that this call may well be delegated as you will be treating the patient, so please ensure that the caller answers all of the questions asked by the call handler – trying to bypass these questions may delay a response being sent.

For patients with non immediately life-threatening conditions:

For patients who do not have an immediately life-threatening condition we will be using the NETs ambulances and will plan the bookings with you to enable us to arrive with the patient in 2 – 4 hours.

If 2 – 4 hours is not clinically appropriate for your patient then it is anticipated that the request for transport will be made by a clinician, who will speak to the LAS clinician, to ensure that a clinically appropriate time-frame and response is agreed. NETS vehicles can provide a response in a shorter time-frame where the patient needs to be conveyed earlier but does not require on-going emergency treatment.

Please identify to the Call Handler if the patient is able to mobilise to a car and would be safe to be transported via this method.



<u>Clinical condition – examples given as guidance only</u>	Time frame for ambulance	Type of ambulance
Non-Emergency – majority of patients who do not require immediate treatment in GP surgery or en-route to hospital, limb injuries, back pain (not AAA), mental health concerns	2 – 4 hours	Non- emergency transport ambulance
Non-Emergency – booked appointment for scan, acute mental health crisis	1 – 2 hours	Non- emergency transport ambulance
Urgent stroke onset over 4.5 hours, acute abdominal pain, ? cauda equine	60 minutes	Non- emergency transport ambulance or Front-line emergency ambulance
Emergency – eg stroke onset under 4.5 hours; sepsis, respiratory conditions requiring ongoing nebulisers, abdominal, head injury / fallers on anticoagulants	20 minutes	Front-line emergency ambulance
Immediately life-threatening – eg acute severe asthma, cardiac chest pain, actively fitting	8 minutes	Front-line emergency ambulance +/- solo response vehicle

Cars can be arranged for the 1-2 or 2-4 hour time frames.

We are keen to work with you all to improve the care we provide to patients who access care through their GP or other community services. Audit has shown that very few patients with a non-immediately life-threatening condition but, who require ambulance transport to hospital, need treatment en-route and so we would urge you to use the non-emergency transport option where possible. This will help us to better respond to your patient in a pre-agreed timeframe and free up emergency ambulances for the sickest and most seriously injured patients who dial 999.

To assist colleagues the enclosed poster has been developed, outlining the LAS process for Health Care Professional (HCP) admissions and the number to call.

Yours Sincerely,

Dr Fenella Wrigley, QHP(c), MRCPCH, DIMC (RCSEd), FRCESM
Interim Medical Director, London Ambulance Service NHS Trust