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|--------------------------------|--|---|
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| Title: | Alternatives to Admission – Advice and Guidance for Same Day Emergency Care | |
| Document Author: | System Director for South Devon | |
| Applicability: | As defined in document | |

Please see document from page 2

**Alternatives to
admission &
Advice & guidance
for same day
emergency care
*Dec 2020***

| | |
|----------------|--|
| Document | Alternatives to admission & Advice & guidance for same day emergency care |
| Document Owner | System Director for South Devon |
| Version | 8 |
| Date created | December 2020 |
| | Updated quarterly |

Purpose:

The purpose of this document is provide primary care professionals and health and care professionals with access to secondary care clinicians and services for advice and guidance and referrals information. This may prevent and unnecessary admission and also ensure patients have access to more timely care.

This document will be updated on a quarterly basis and the information can also be found on service finder if you prefer to search electronically.

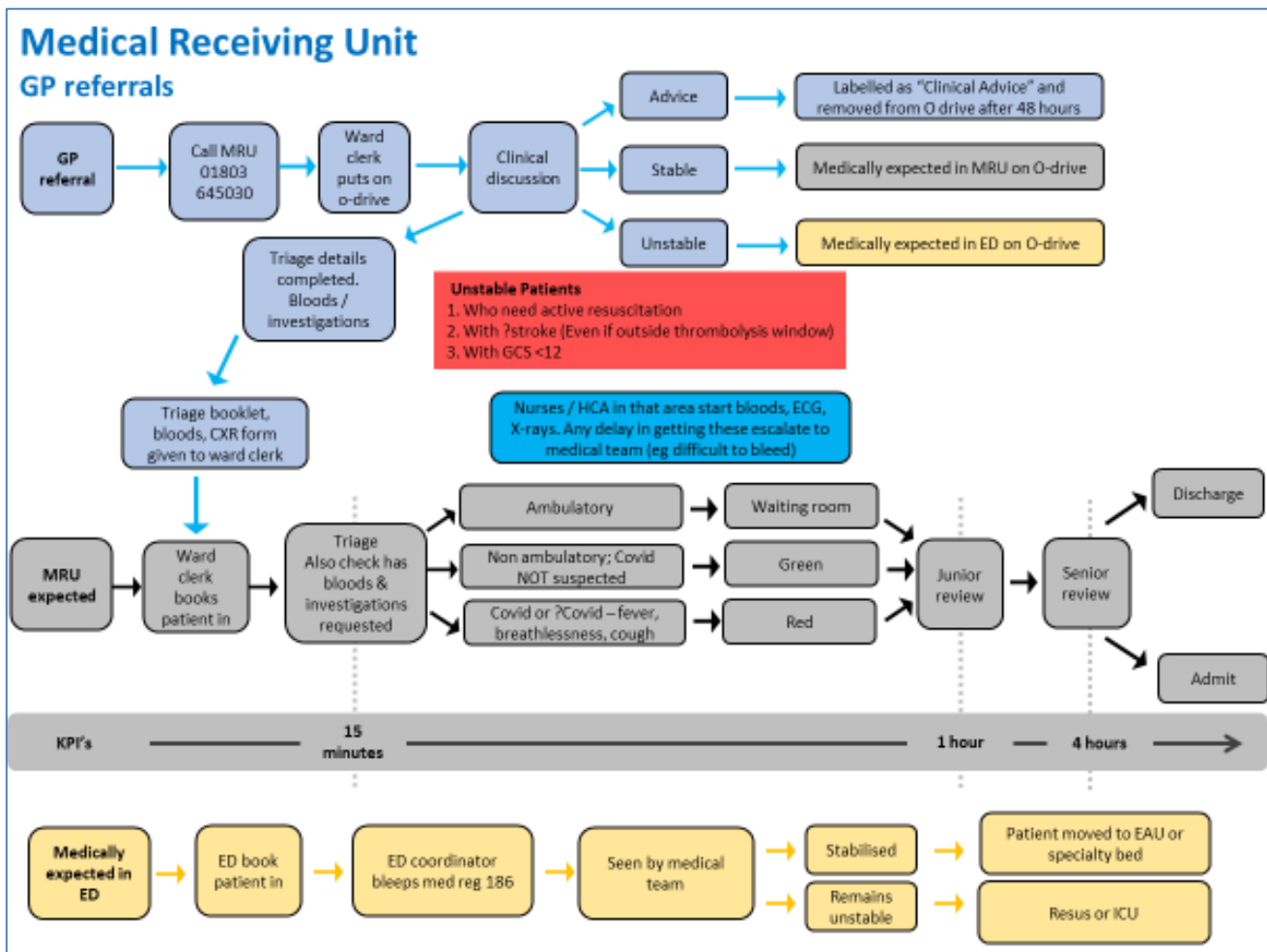
<https://digital.nhs.uk/services/nhs-service-finder>

The Torbay and South Devon Emergency Department advice line operates 24/7 and is available for advice and to discuss any patient who you feel needs to be seen urgently in the Emergency Department.

Tel: 01803 654064

CONTENTS

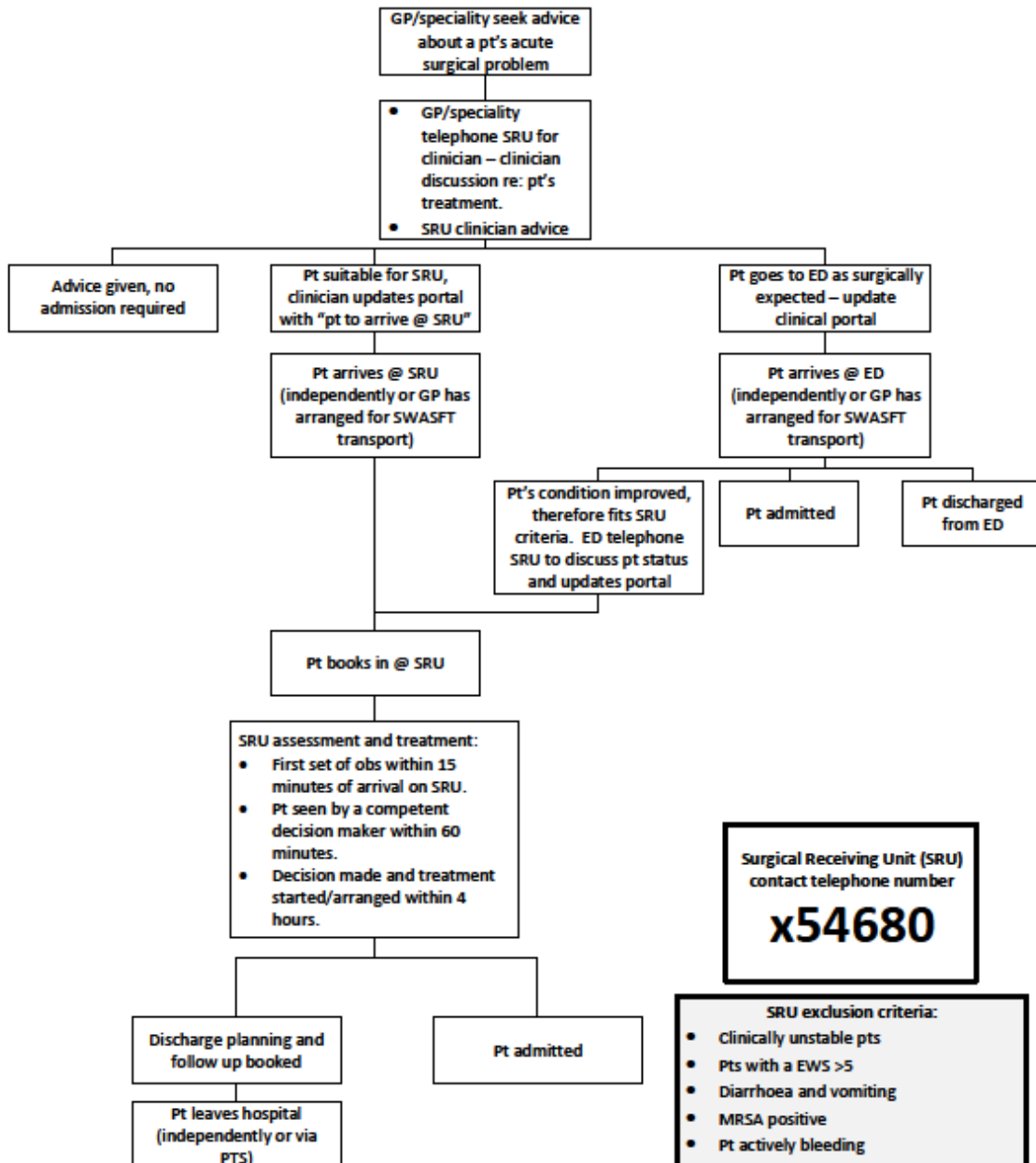
| Service | Page no |
|---|---------|
| MRU (Medical Receiving Unit) | 1 |
| SRU (Surgical Receiving Unit) | 2 |
| SSPAU (Paediatric Short Stay Assessment Unit) | 5 |
| Cardiology | 6 |
| Chronic pain | 7 |
| Diabetes and Endocrinology | 8 |
| Dermatology | 9 |
| Gastroenterology | 10 |
| Haematology | 11 |
| Ricky Grant Day Unit | 11 |
| Turner Ward; in-patient Haem/Onc | |
| Haematology out-patients | |
| Medical Admissions Avoidance Team (MAAT) | 12 |
| Acute DVT Service | |
| Inpatient Parenteral Antibiotic Therapy | |
| Anticoagulation Service | |
| Neurology | 14 |
| Obstetrics & Gynaecology | 15 |
| Ophthalmology | 16 |
| Palliative Care | 17 |
| Oncology | 18 |
| Respiratory | 19 |
| Rheumatology | 20 |
| Stroke | 21 |
| TIA | 22 |



Surgical Receiving Unit (SRU): 01803 654680

Surgical Receiving Unit (SRU)

SOP 2: Pathway for patients who have been referred to SRU by the GP or speciality clinician
 Process owner: N Armstrong | Version 2.0 | Last updated: 18/09/2020



Surgical Receiving Unit (SRU)
 contact telephone number
x54680

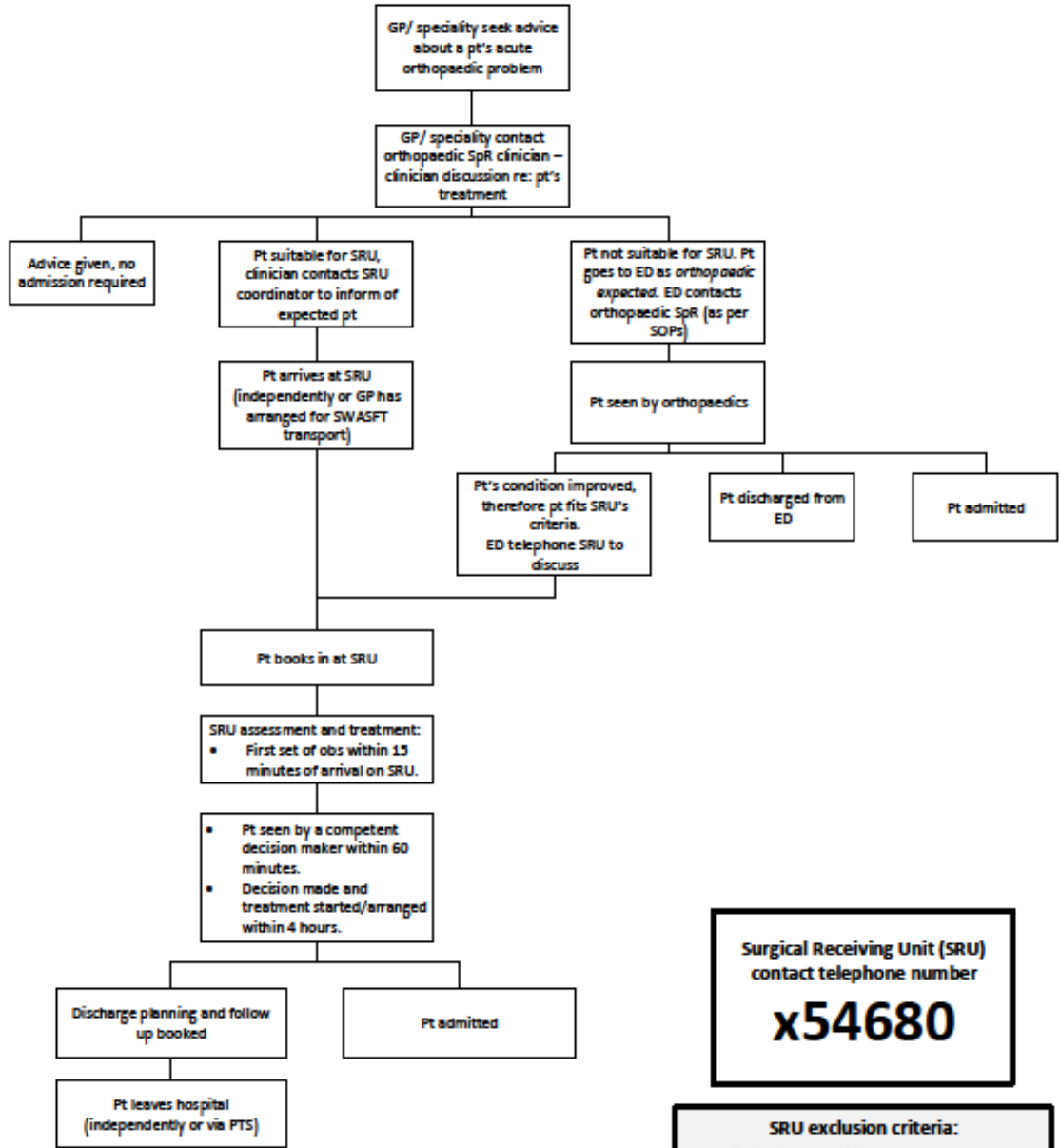
- SRU exclusion criteria:**
- Clinically unstable pts
 - Pts with a EWS >5
 - Diarrhoea and vomiting
 - MRSA positive
 - Pt actively bleeding
 - Pt under 18 years old
 - Non-ambulatory (bed bound) pts
 - Vascular pts
 - Confirmed or suspected #NOF
 - Trauma pts
 - Red flag pts (abusive, violent or threatening behaviour)

Surgical Receiving Unit (SRU)

SOP 6: Pathway for a patient referred to SRU by the GP or orthopaedic clinician | Process owner: A. Wilson | Version 2.0 | Last updated: 18/09/20



Torbay and South Devon
NHS Foundation Trust

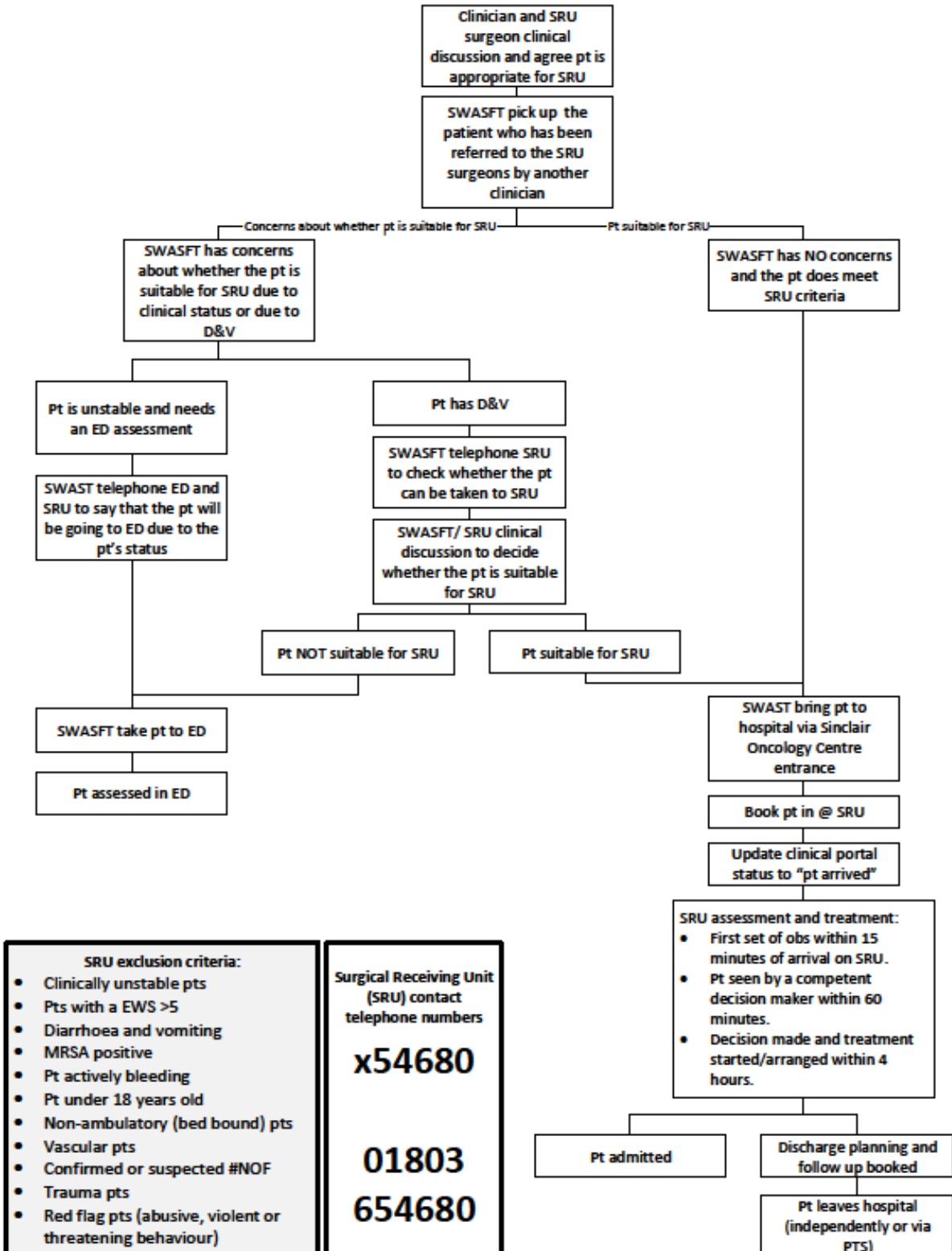


Surgical Receiving Unit (SRU)
contact telephone number
x54680

- SRU exclusion criteria:**
- Clinically unstable pts
 - Pts with a EWS >5
 - Diarrhoea and vomiting
 - MRSA positive
 - Pt actively bleeding
 - Pt under 18 years old
 - Non-ambulatory (bed bound) pts
 - Vascular pts
 - Confirmed or suspected #NOF
 - Trauma pts
 - Red flag pts (abusive, violent or threatening behaviour)

Surgical Receiving Unit (SRU)

SOP 4: Pathway for patients arriving via SWASFT following clinician to SRU surgeon discussion
 Process owner: N Armstrong | Version 2.0 | Last updated: 18/09/2020



- SRU exclusion criteria:**
- Clinically unstable pts
 - Pts with a EWS >5
 - Diarrhoea and vomiting
 - MRSA positive
 - Pt actively bleeding
 - Pt under 18 years old
 - Non-ambulatory (bed bound) pts
 - Vascular pts
 - Confirmed or suspected #NOF
 - Trauma pts
 - Red flag pts (abusive, violent or threatening behaviour)

Surgical Receiving Unit (SRU) contact telephone numbers

x54680

01803

654680

SSPAU (Short Stay Paediatric Assessment Unit): 07584 272641

Purpose: The unit provides a short stay service for the assessment, observation and treatment of children & young people (C&YP) in a timely manner in a child focused environment to prevent unnecessary inpatient admissions and reduce length of stay.

| | |
|---|--|
| Service Name | Paediatrics |
| Service Lead | Dr Rowan Kerr-Liddell |
| Practice Manager | Corrinne Hodge Tel: 01803 655287 corrinne.hodge@nhs.net |
| Referrals for: | Children with medical conditions e.g. breathing difficulties (bronchiolitis, asthma), croup, viral illness, rash, diarrhoea, vomiting, febrile convulsions, head injuries, deliberate overdose, known diabetics (not in DKA) or other medical conditions likely to need a short period of treatment and /or observation. |
| Access | Urgent enquiry to avoid admittance - Monday-Friday: 09:00-21:00, Consultant on-call mobile 07584 272641 |
| Opening times | Last Admission 7pm 9am – 9pm Monday – Friday |
| Maximum Wait | Same day advice. Admission through ED |
| Section last reviewed and updated: | November 2020 |

Urgent cardiology advice

| Urgent cardiology advice | |
|---|---|
| Service Name | Cardiology |
| Service Lead | Dr Lisa Yung |
| Practice Manager | Gaynor Sattar Tel: 01803 656297 email: gaynor.sattar1@nhs.net |
| Referral Criteria | <ul style="list-style-type: none"> • Direct GP referrals to Rapid Access Slots (cardiac chest pain / heart failure). • Please ensure GP heart failure referrals are accompanied by an NT-pro BNP result to enable triage to 2WW or 6WW. • Urgent GP OP referrals also possible for other conditions and triaged by receiving consultant. • Consultant of the day available on phone to discuss alternatives to admission. • Please ensure ALL cardiology referrals have an ECG attached. • Specialist Nurses (chest pain, heart failure, arrhythmia) are available for advice and management. |
| Access | Consultant on-call of the day 07881 502455 Heart Failure Nurse phone switchboard (01803 614567) and ask for bleep 67 566 Arrhythmia Nurse 6424 Chest pain nurse 6964 |
| Opening times | 0900 – 1700 |
| Maximum Wait | Same day service where possible, rapid access 2 weeks maximum |
| Section last reviewed and updated: | August 2020 |
| | |

Chronic Pain

| Chronic Pain | |
|---|--|
| Service Name | Chronic Pain |
| Service Lead | Andrew Gunatilleke |
| Practice Manager | Caryn Brockington Tel: 01803 656872 Email: carynbrockington@nhs.net |
| Referral Criteria | Pain lasting more than 3 months |
| Access | GPs can access advice from SAICO (via ERS from February 2018) GP Referral to Pain Clinic |
| Exceptions | <ul style="list-style-type: none"> • Simple lower back and radicular pain should be signposted to MSK Physio • Possible Cauda equina syndrome should be referred to Orthopaedics • Palliative care patients with acute spinal cord compression please liaise with Orthopaedics regarding need for decompression • Fibromyalgia Syndrome - patients with Fibromyalgia should be referred into the Fibromyalgia pathway. Details are found in the South and West Devon Formulary • Headache - headache that cannot be managed in primary care should initially be referred to the Headache Clinic |
| Opening times | 09:00 – 17:00 Monday to Friday (Outpatient Service) |
| Maximum Wait | 12 months |
| Section last reviewed and updated: | October 2020 |

Diabetes and Endocrinology

| Urgent diabetes advice | |
|---|---|
| Service Name | Diabetes & Endocrinology |
| Service Lead | Dr Gill Spyer |
| Practice Manager | Suzanne Matthews TEL: 01803 656135 email: suzannematthews@nhs.net |
| Referral Criteria | <p>The diabetic team can see same day urgent referrals on request or provide telephone advice to avoid admission.</p> <p>New type 1 diabetes, diabetic foot problem or acute decompensation of endocrine condition if the patient is well enough to be at home.</p> |
| Access | Monday-Friday: 09:00-17:00, Consultant or SpR on 0790 0303 338 or contact on-call consultant via switchboard (01803 614567) |
| Opening times | 09:00-17:00 Monday – Friday |
| Maximum Wait | Same day service when possible |
| | E-Referral advice and guidance will be forthcoming within 5 working days |
| Section last reviewed and updated: | August 2020 |

Dermatology

| Urgent dermatology advice | |
|---|--|
| Service Name | Dermatology |
| Service Lead | Dr Sheau Ng |
| Practice Manager | Trish Pickford Tel: 01803 654587 email: tricia.pickford@nhs.net |
| Referral Criteria | Skin cancer referrals (2ww) or general clinics via Choose & Book Non-urgent advice/guidance e mails (dermatology.sdhcft@nhs.net) |
| Access | Dermatology department 01803 654837 / 654869 / 654995 / 655038 Messages can be left on these numbers and are picked up regularly throughout the day Generic email dermatology.sdhcft@nhs.net can be used for non-urgent queries. |
| Opening times | 09.00 – 16.30 Monday – Friday |
| Maximum Wait | Same day advice and clinic review when appropriate |
| Section last reviewed and updated: | November 2020 |

Gastroenterology

| Adult general gastroenterology advice | |
|---------------------------------------|--|
| Service Name | Adult Gastroenterology service |
| Service Lead | Dr Mark Feeney |
| Practice Manager | Jo Loader Tel: 01803 654513 email: joanne.loader@nhs.net |
| Referral Criteria | <ul style="list-style-type: none"> Jaundice: Should be admitted if jaundiced and the patient is unwell, has signs of sepsis, AKI, new confusion or coagulopathy. This should be done via the Medical take (currently Medical Receiving Unit). New jaundice in patients with known cirrhosis or significant alcohol history should be discussed with the Gastroenterologist of the day regarding the need for admission/urgent review If well but bilirubin > 200 please discuss with the gastroenterologist of the day regarding whether the patient is appropriate for urgent outpatient investigation. If new jaundice with no concerning features (above) then please refer via 2ww and we will usually arrange urgent investigation and/or review in our emergency clinic. Bloody diarrhoea: If systemically well can be referred to GOD to arrange urgent flexible sigmoidoscopy. GP must arrange for stool sample to be sent Flare of IBD: First point of contact is IBD nurse specialists – Monday to Friday 9am-5pm - Tel: 01803 655111 or email: lbdtorbay.sdhct@nhs.net but if unavailable and the patient is unwell contact GOD. |
| Access | Gastroenterologist of the day (GOD) phones: Cromie GOD: 07917 071466 or phone switchboard (01803 614567) and ask for bleep (6003) – Primary Care / GP enquiries Allerton GOD: 07824 383549 or phone switchboard (01803 614567) and ask for bleep (6213) – Hospital enquiries / Inpatients |
| Opening times | Monday - Friday 0900- 1700 |
| Maximum Wait | Immediate advice. Will arrange review in HOT clinic on Hutchings Ward Level 8 as appropriate. |
| Section last reviewed and updated: | November 2020 |

Haematology including: Ricky Grant Day Unit
 Turner Ward – inpatient Haematology/Oncology beds
 Haematology outpatients; main Outpatients, level 2

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| Service Lead | Dr Heather Eve |
| Practice Manager | Abbie Ashworth Tel: 01803 655562 email: abbie.ashworth@nhs.net |
| | <p>The Haematology service provides several points of contact for healthcare professionals to seek advice and guidance. We have processes for assessing and managing patients with acute problems as day cases or outpatients which the Haematology team manages without recourse to the Emergency Dept. This principle applies to patients known to the service as well as new patients with potential Haematological disorders. These services can only be accessed through contact and discussion with one of the contact points listed below.</p> <ol style="list-style-type: none"> <p>1. Chemotherapy telephone triage nurse – 01803 655219</p> <p>Base: Ricky Grant Day Unit (RGDU) Hours: 08.00-18.00 weekdays Mon-Saturday Will provide advice to patients currently on treatment and arrange assessment and review if clinically appropriate</p> <p>2. Turner ward -01803 655527</p> <p>Hours: 24/7 Will provide advice to patients known to the Haematology service out of hours and at weekend when RGDU closed. Will arrange urgent admission and assessment of patients if clinically appropriate</p> <p>3. Haematology Clinical Nurse Specialists – 01803-655264. Can bleep through switchboard.</p> <p>Base: Haematology Dept Hours: 08.30-16.30 weekdays Provide advice and support to patients with Haematological malignancies and can arrange urgent review on RGDU or haematology outpatients as necessary. This is a telephone and voice mail service – calls will be responded to on the same day.</p> <p>4. Haemostasis and Thrombosis Nurse specialist – 01803 655270. Can bleep through switchboard</p> <p>Base: Haematology Dept Hours: 08.30-16.30 Provides advice to patients and clinical teams about patients with bleeding disorders and can arrange urgent review on GRDU or outpatients. This is a telephone and voice mail service – calls will be responded to on the same day</p> <p>5. Haematologist of the week phone (HOW phone) - 07879487599</p> <p>Hours: 24/7 This phone is carried by the Consultant Haematologist on call or the Haematology SPR. It can be used to seek advice and guidance on Haematological issues by GPs or Hospital staff, and most appropriate referral route or assessment pathway.</p> |
| Section last reviewed and updated: | September 2020 |

Medical Admissions Avoidance Team (MAAT)

| | |
|--------------------------|--|
| <p>Nurse led service</p> | <p>Michelle O’Neill (matron) michelle.oneill@nhs.net</p> <p>Location/Site: Based in Torbay Hospital. Patients can on occasion be supported in their own homes according to need</p> <p>Access: GP’s, community nurses, practice nurses, intermediate care team</p> <p>Telephone 01803 655776 (internal 55776). If referring out of hours please leave message on answerphone. Phone switchboard (01803 614567) and ask for bleep 6902</p> <p>Opening times: 09:00-17:00 7 days a week</p> |
| | <p><u>DVT Service:</u></p> <ul style="list-style-type: none"> • Phoned referrals from GP’s to number 01803 655776 • GP to email MAAT: MAAT.sdhct@nhs.net the patients medical, drug history and DVT proforma. • Patients will be booked into a MAAT clinic • Ultrasound scans arranged by MAAT reception. • MAAT will Review patients post scan and commence anticoagulation treatment. • Positive ileo-femoral DVTs are referred on to medics in MRU for review. • Communicate with GPs, regarding plan of treatment. • Outside of MAAT working hours (9am – 5pm) please leave a message on the answer phone and email as above. The messages are picked up regularly throughout the day. <p><u>Ambulatory pathway for Pulmonary Embolism</u></p> <ul style="list-style-type: none"> • All the above patients must be seen by the medics prior to referral to MAAT. • refer to the medics in MRU • If suitable the patient will be referred to MAAT • CTPA scan will be arranged by MAAT • All patients will be followed up by MAAT post positive PE • GPs will be informed of the result and follow up treatment plan. <p><u>Outpatient Parenteral Antibiotic Therapy (OPAT); once-daily IV antibiotics or 24 hour tazocin infusion</u></p> |

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| | <ul style="list-style-type: none"> Once daily intravenous antibiotic treatment for cellulitis, ESBLs, UTI endocarditis, osteomyelitis, septic arthritis, bursitis, infected skin grafts, MS, meningitis and various wound infections. <p><u>Direct GP Referrals for all IV antibiotics:</u></p> <ol style="list-style-type: none"> Contact on call microbiologist with patient details Via switch board. The consultant will prescribe antibiotics for MAAT. Microbiologist will send the referral request to MAAT MAAT will contact patients and arrange appointment. Post discharge summary of care will be sent to the GP. <p>MAAT can administer stat doses of IV fluids 500mls or Sub-cut fluids.</p> <p>GP to Phone MAAT on 01803 655776 with the request and prescribe the required IV fluids, along with an email of the patient’s history and duration of fluids.</p> |
| <p>Section last reviewed and updated:</p> | <p>November 2020</p> |

Neurology

| Neurology | |
|---|---|
| Service Name | Neurology advice and guidance |
| Service Lead | Dr Will Knight |
| Practice Manager | Mandy Goodwin Tel: 01803 654911 amandagoodwin1@nhs.net |
| Referral Criteria | For urgent enquiries, neurologists happy to be contacted by GPs via neurology department (01803 655093/ 654827 or 655093) for discussion, although availability will vary depending upon other clinical commitments |
| Access | Non-urgent advice can be requested by GPs via the e-referral system using the advice and guidance form |
| Opening times | 0900-1700 Monday-Friday |
| Maximum Wait | Advice and guidance will be forthcoming within 5 working days |
| Section last reviewed and updated: | October 2020 |

Obstetrics and Gynaecology

| Early Pregnancy Assessment Unit | |
|---|---|
| Service Name | Early Pregnancy Assessment Unit (EPU) |
| Service Lead | Mr Jonathan Hindley |
| Practice Manager | Lisa Bratcher-McBryde Tel: 01803 656524 email: lisa.mcbryde@nhs.net |
| Referral Criteria | <p>Patients requiring urgent assessment for the following who are not likely to require admission:</p> <ul style="list-style-type: none"> • Positive pregnancy test 6 weeks to 13+6 weeks • Pain and/or PV bleed, previous recurrent miscarriage, previous or suspected ectopic pregnancy • Previous molar pregnancy |
| Access | EPU - 01803 654607 – 13:00 – 16:00hrs Gynaecology Reception - 01803 654668 |
| Opening times | Monday-Friday, 08:45-16:00hrs |
| Section last reviewed and updated: | October 2020 |

| Gynae Assessment Unit | |
|--|--|
| Service Name | Gynae Assessment unit |
| Service Lead | Mr Jonathan Hindley |
| Practice Manager | Lisa Bratcher-McBryde Tel: 01803 656524 email: lisa.mcbryde@nhs.net |
| Referral Criteria: GP/midwives/ED to refer | <p>Patients requiring urgent assessment for the following who are not likely to require admission:</p> <ul style="list-style-type: none"> • Post-operative women • Women being monitored for pregnancy of unknown location • Women who have been previously seen for hyperemesis can self-refer (Direct Access) |
| Access | 01803 654030 or 01803 654140 or ring switchboard (01803 614567) and ask for the SHO bleep |
| Opening times | 7 days per week, 24hr opening. |
| Section last reviewed and updated: | October 2020 |

Ophthalmology

| Ophthalmology | |
|---|---|
| Service Name | Ophthalmology |
| Service Lead | Mr Mohammad Abbasi |
| Practice Manager | Nicki Spalding Tel: 01803 654701 email: nicki.spalding@nhs.net |
| Location/site | Eye Casualty |
| Referral Criteria | <p>Any patient requiring urgent ophthalmic input should be referred directly to Eye Casualty by the GP (e.g. suspicion acute glaucoma, sudden loss of vision, eye trauma)</p> <p>Out of Hours: patients to be sent to ED</p> <p>Advice for inpatients can be sought from the on-call ophthalmology doctor</p> |
| Access | Call Casualty Phone: 07818 562917 (Monday to Friday 9am – 5pm). |
| Opening times | Monday to Friday: all day |
| Maximum Wait | 24 hours |
| Section last reviewed and updated: | August 2020 |

Palliative Care

| | |
|------------------------------------|--|
| Service Name | Specialist Palliative Care Service |
| Service Lead | Dr George Walker |
| Referral Criteria | Advice & guidance on support and symptom management for patients with life limiting conditions. |
| Access Opening times | <p>Advice available 24/7 (see below)</p> <p>For patients in acute hospital please contact hospital palliative care team 9-5 Mon-Sat 01803 655042 or bleep via switchboard. Use OOH number (below) outside of these hours.</p> <p>For patients in the community and community hospitals please contact:- Rowcroft community palliative care team 01803 210811 9-5 Mon-Fri or 01803 210812 9-1 Sat/Sun Hospice at home team (last 2 weeks of life) 24/7 01803 217620 For medical advice for community patients or referrals to in patient unit 9-5 Mon-Fri 01803 210810</p> <p>OOH advice for patients in all settings-24/7 advice line via Rowcroft Hospice 01803 210800</p> |
| Section last reviewed and updated: | August 2020 |

Acute Oncology

| Acute Oncology | |
|------------------------------------|--|
| Service Name | Oncology (Medical and Clinical oncology service) |
| Service Lead | Dr Medley – Acute Oncology service lead |
| Referral Criteria | See below |
| Access | <p>For advice about patients having systemic treatment (e.g. chemotherapy)</p> <p>1) Chemotherapy Telephone Triage line 01803 655219 Hours: 08.00-18.00 weekdays 01803 655527 (Turner ward) Hours: all other times</p> <p>For advice about patients having radiotherapy</p> <p>2) Macmillan Radiographer - 01803 654273 or phone switchboard (01803 614567) and ask for bleep 6 881 Hours: 09:00 – 17:00 Monday - Friday</p> <p>For advice about patients who are unwell with known cancer</p> <p>3) Acute Oncology Clinical Nurse Specialists – 07920 592733 Hours: 09.00-17.00 Monday - Friday</p> <p>For Oncology Consultant advice</p> <p>4) Oncology Phone – 07767 300979 Hours: 09.00-17.00 Monday - Friday</p> <p>For <u>Urgent</u> Out of hours advice from an SpR/Consultant please contact the on call oncology consultant at RDE (via switchboard)</p> |
| Opening times | 7 day service as above |
| Maximum Wait | Same day. Please advise patients that there may be a wait for treatment and or bed depending on severity of their symptoms |
| Section last reviewed and updated: | August 2020 |

Respiratory

| Respiratory | |
|------------------------------------|---|
| Service Name | Respiratory |
| Service Lead | Dr Elizabeth Ginn |
| Practice Manager | Gaynor Sattar Tel: 01803 656297 email: gaynor.sattar1@nhs.net |
| Referral Criteria | Urgent enquiries Post discharge - THORT will provide support for early discharge of patients with COPD/resolving pneumonias and can arrange home oxygen & nebulisers if needed to support discharge |
| Access | Urgent enquiry to avoid admittance - Monday-Friday: 09:00-17:00, Consultant on-call mobile 07900 262423 GPs can request for non-urgent advice and guidance via the generic email sdhct.respiratorymedicine@nhs.net THORT team phone switchboard (01803 614567) and ask for bleep 6928 Contact no. 01803 655199 Asthma Specialist Nurse via switchboard (01803 614567) and ask for bleep 6733 COPD Specialist Nurse via switchboard (01803 614567) and ask for bleep 6959 |
| Opening times | Monday-Friday 0900-1700 |
| Maximum Wait | Same day service where possible |
| Section last reviewed and updated: | October 2020 |

Rheumatology

| Rheumatology | |
|---|---|
| Service Name | Rheumatology |
| Service Lead | Rachel Winfield (From October) |
| Practice Manager | Terry Kidd 01803 654518 terry.kidd@nhs.net |
| Referral Criteria | <p>Patient initiated Helpline /Telephone Clinic</p> <p>Help and advice available through department generic email account (rheumatology.sdhct@nhs.net) for both GP's and Patients</p> <p>Giant Cell Arteritis/ Temporal Arteritis: Phone 07775 407925- outside 09:00-17:00 Monday to Friday, leave an answer phone message AND e-mail rheumatology.sdhct@nhs.net with patient details. Commence patient on 60mg prednisolone po For use by GPs/ ED/ Acute medics</p> <p>If ophthalmic symptoms, also discuss with on-call ophthalmologist on 07818 562917- may need iv methylprednisolone which can be given via MAAT</p> |
| Access | <p>Helpline available from 09.00 to 16.00 Monday to Friday 01803-654939</p> <p>Non-urgent advice can be requested by GPs via the e-referral system using the advice and guidance form</p> <p>Generic email account: rheumatology.sdhct@nhs.net</p> |
| Opening times | 08:30-1700 Monday – Friday |
| Maximum Wait | Same day advice, admission dependent on bed availability Advice & guidance will be forthcoming within 5 working days |
| Section last reviewed and updated: | October 2020 |

Stroke

| Stroke | |
|---|---|
| Service Name | Stroke |
| Service Lead | Dr John France |
| Practice Manager | Mandy Goodwin Tel: 01803 654911 amandagoodwin1@nhs.net |
| Referral Criteria | <p>All stroke care is urgent, however if:</p> <ul style="list-style-type: none"> • Non-disabling stroke has happened long-time ago (6 weeks or more) and the patient is on appropriate secondary prevention, please consider referral to stroke secretary for patients to be seen non-urgently via email to sdhct.stroke@nhs.net • If a GP thinks admission is not appropriate or the patient does not want to be admitted, advice is available during normal working hours through numbers below |
| Access | Stroke Nurse Co-ordinators can be contacted by phoning 01803 654345 or phone switchboard (01803 614567) and ask for bleep 67 536 |
| Opening times | 9am – 5pm Monday – Friday |
| Maximum Wait | Same day advice. Admission through ED |
| Section last reviewed and updated: | August 2020 |

Transient ischaemic attack (TIA)

| Transient ischaemic attack (TIA) | |
|---|---|
| Service Name | Urgent TIA clinic |
| Service Lead | Dr John France |
| Practice Manager | Mandy Goodwin Tel: 01803 654911 amandagoodwin1@nhs.net |
| Referral Criteria | <ul style="list-style-type: none"> Torbay Hospital operates a Monday – Friday (except bank holidays) TIA clinic for rapid assessment of all TIA patients within 24 hours. The objective of the clinic is to see all patients with suspected TIAs irrespective of their ABCD2 risk and this abolishes the need for ABCD2 risk stratification prior to the referral |
| Access | <ul style="list-style-type: none"> Please complete the referral form on the intranet and email to tsdft.tiaclinic@nhs.net All TIA referrals will be reviewed and clinically triaged by a Stroke Consultant We will aim to see patients referred before 12 midday, on the same day. Referrals after 12 midday will be seen the following day The service plans to see a maximum of 5 patients per day, unless by prior agreement of a Stroke Consultant Patients will be contacted by the Stroke Medical Secretary to agree their appointment. Admit via Emergency Department if there are ongoing symptoms, there has been a disabling stroke or swallowing difficulties |
| Opening times | Monday-Friday as above |
| Maximum Wait | If referred before 12 midday and agreed by a Stroke Consultant patient will be seen the same day |
| Section last reviewed and updated: | October 2020 |

Document Control Information

This is a controlled document and should not be altered in any way without the express permission of the author or their representative.

Please note this document is only valid from the date approved below, and checks should be made that it is the most up to date version available.

If printed, this document is only valid for the day of printing.

This guidance has been registered with the Trust. The interpretation and application of guidance will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using clinical guidance after the review date, or outside of the Trust.

| | | | |
|---|---|--------------------------|------------------|
| Ref No: | 2700 | | |
| Document title: | Alternatives to Admission – Advice and Guidance for Same Day Emergency Care | | |
| Purpose of document: | | | |
| Date of issue: | 19 February 2021 | Next review date: | 19 February 2024 |
| Version: | 8 | Last review date: | |
| Author: | System Director for South Devon | | |
| Directorate: | Trustwide | | |
| Equality Impact: | The guidance contained in this document is intended to be inclusive for all patients within the clinical group specified, regardless of age, disability, gender, gender identity, sexual orientation, race and ethnicity & religion or belief | | |
| Committee(s) approving the document: | Gold Command Silver Team | | |
| Date approved: | 14 December 2020 | | |
| Links or overlaps with other policies: | | | |

| | | |
|--|--|--------------------------|
| Have you identified any issues on the Rapid (E)quality Impact Assessment. If so please detail on Rapid (E)QIA form. | Yes <input type="checkbox"/> | |
| | Please select Yes No | |
| Does this document have implications regarding the Care Act? <i>If yes please state:</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does this document have training implications? <i>If yes please state:</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does this document have financial implications? <i>If yes please state:</i> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---|--------------------------|--------------------------|
| Is this document a direct replacement for another? <i>If yes please state which documents are being replaced:</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | |

Document Amendment History

| Date | Version no. | Amendment summary | Ratified by: |
|------------------|-------------|---|-----------------------------|
| 19 February 2021 | 8 | Revision (No previous versions published on Documents Library) | Gold Command Silver Team |

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on ICON.

<https://icon.torbayandsouthdevon.nhs.uk/areas/mental-capacity-act/Pages/default.aspx>

Infection Control

All staff will have access to Infection Control Policies and comply with the standards within them in the work place. All staff will attend Infection Control Training annually as part of their mandatory training programme.

Rapid (E)quality Impact Assessment (EqIA) *(for use when writing policies)*

| | | | |
|---|--|--|--|
| Policy Title (and number) | | Version and Date | |
| Policy Author | | | |
| An (e)quality impact assessment is a process designed to ensure that policies do not discriminate or disadvantage people whilst advancing equality. Consider the nature and extent of the impact, not the number of people affected. | | | |
| Who may be affected by this document? | | | |
| Patients/ Service Users | <input type="checkbox"/> | Staff | <input type="checkbox"/> |
| Other, please state... | | <input type="checkbox"/> | |
| Could the policy treat people from protected groups less favourably than the general population? PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below | | | |
| Age | Yes <input type="checkbox"/> No <input type="checkbox"/> | Gender Reassignment | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Race | Yes <input type="checkbox"/> No <input type="checkbox"/> | Disability | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Gender | Yes <input type="checkbox"/> No <input type="checkbox"/> | Pregnancy/Maternity | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Sexual Orientation | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Religion/Belief (non) | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Marriage/ Civil Partnership | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Is it likely that the policy could affect particular 'Inclusion Health' groups less favourably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees) | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Please provide details for each protected group where you have indicated 'Yes'. | | | |
| VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion | | | |
| Is inclusive language ⁵ used throughout? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> |
| Are the services outlined in the policy fully accessible ⁶ ? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> |
| Does the policy encourage individualised and person-centred care? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> |
| Could there be an adverse impact on an individual's independence or autonomy ⁷ ? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> |
| EXTERNAL FACTORS | | | |
| Is the policy a result of national legislation which cannot be modified in any way? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?) | | | |
| Who was consulted when drafting this policy? | | | |
| Patients/ Service Users | <input type="checkbox"/> | Trade Unions | <input type="checkbox"/> |
| Protected Groups (including Trust Equality Groups) | | <input type="checkbox"/> | |
| Staff | <input type="checkbox"/> | General Public | <input type="checkbox"/> |
| Other, please state... | | <input type="checkbox"/> | |
| What were the recommendations/suggestions? | | | |
| Does this document require a service redesign or substantial amendments to an existing process? PLEASE NOTE: 'Yes' may trigger a full EIA, please refer to the equality leads below | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| ACTION PLAN: Please list all actions identified to address any impacts | | | |
| Action | Person responsible | Completion date | |
| | | | |
| | | | |
| AUTHORISATION: | | | |
| By signing below, I confirm that the named person responsible above is aware of the actions assigned to them | | | |
| Name of person completing the form | | Signature | |
| Validated by (line manager) | | Signature | |

Please contact the Equalities team for guidance:

For Devon CCG, please email d-ccg.equalityanddiversity@nhs.net & d-ccg.QEIA@nhs.net

For Torbay and South Devon NHS Trusts, please call 01803 656676 or email pdf.sdhct@nhs.net

This form should be published with the policy and a signed copy sent to your relevant organisation

Consider any additional needs of carers/ parents/ advocates etc, in addition to the service user

² Travelers may not be registered with a GP - consider how they may access/ be aware of services available to them

³ Consider any provisions for those with no fixed abode, particularly relating to impact on discharge

⁴ Consider how someone will be aware of (or access) a service if socially or geographically isolated

⁵ Language must be relevant and appropriate, for example referring to partners, not husbands or wives

⁶ Consider both physical access to services and how information/ communication is available in an accessible format

⁷ Example: a telephone-based service may discriminate against people who are d/Deaf. Whilst someone may be able to act on their behalf, this does not promote independence or autonomy

Clinical and Non-Clinical Policies – Data Protection

Torbay and South Devon NHS Foundation Trust (TSDFT) has a commitment to ensure that all policies and procedures developed act in accordance with all relevant data protection regulations and guidance. This policy has been designed with the EU General Data Protection Regulation (GDPR) and Data Protection Act 2018 (DPA 18) in mind, and therefore provides the reader with assurance of effective information governance practice.

The UK data protection regime intends to strengthen and unify data protection for all persons; consequently, the rights of individuals have changed. It is assured that these rights have been considered throughout the development of this policy. Furthermore, data protection legislation requires that the Trust is open and transparent with its personal identifiable processing activities and this has a considerable effect on the way TSDFT holds, uses, and shares personal identifiable data.

Does this policy impact on how personal data is used, stored, shared or processed in your department? Yes No

If yes has been ticked above it is assured that you must complete a data mapping exercise and possibly a Data Protection Impact Assessment (DPIA). You can find more information on our [GDPR](#) page on ICON (intranet)

For more information:

- Contact the Data Access and Disclosure Office on dataprotection.tsdf@nhs.net,
- See TSDFT's [Data Protection & Access Policy](#),
- Visit our [Data Protection](#) site on the public internet.