POLICY & PROCEDURE



TITLE: 24/7 Access to Clinical Advice							
Scope/Purpose: To ensure a timely response to telephone calls and secure electronic messages							
during and after office hours							
Division/Department : All HealthPoint Clinics F			Policy/Procedure #:				
Original Date: July 24, 2014			_XNewReplacement for:				
Date Reviewed:	Date Revised:	Implementation:		CPIC	Board		
				Approved:	Approved:		
	August 21, 2014	December 1, 2014		August 26, 2010			
Responsible Party: Director of System Development; Director of Compliance/QA							

DEFINITIONS:

Urgent/Non urgent

Urgent: Conditions determined to need medical evaluation within a specific time frame, usually immediate action or attention is needed.

Non-urgent: Conditions determined to not need immediate medical evaluation within a specific time frame.

Clinical/Non-clinical advice

Clinical advice: advice that can only be given by a licensed or certified healthcare professional concerned with observation and/or treatment of patients.

Non-clinical advice: advice that is given by a healthcare professional, or other building staff, that does not pertain to the observation and/or treatment of patients.

POLICY:

HealthPoint will answer all phone calls and messages sent through the electronic system in a timely manner by providing access to an appropriate staff member, clinician, or nurse triage answering service at all times.

The telephone is the predominant way patients, families, consultants, and others try to communicate with the practice. Patients also use the Patient Portal to communicate with the practice. Managing the telephone lines and the messages sent through the Patient Portal is critical to maintaining practice operations and to providing excellent healthcare services to patients.

1 / 4

PROCEDURE:

A. Clinical Advice During Office Hours by Telephone

- 1. All patients have access to timely clinical advice by telephone during office hours.
 - a. Care Team members respond to telephone calls and document via telephone encounters in the electronic health record (EHR) system. Calls requiring a provider's response are documented in a telephone encounter and assigned to the appropriate provider.
 - i. **HIGH PRIORITY** messages are answered **within two hours**. However, staff is encouraged to speak face to face with provider if call is of such an urgent nature that it requires an immediate response.
 - ii. **ROUTINE** or non-urgent messages should be returned on the same day, if possible, and always **within one business day** of receiving the message.
 - b. Staff documents any action taken regarding the call in a telephone encounter in the EHR system.
 - c. When all actions are complete, the telephone encounter is marked as addressed.

B. Clinical Advice After-Hours by Telephone

- 1. All patients have access to timely clinical advice by telephone after office hours.
 - a. Patients calling for advice after office hours have the option of being transferred to the FoneMed answering service for immediate clinical advice. The FoneMed clinical staff will triage the patient to the appropriate care using the Schmitt/Thompson medical protocols. If the need is urgent, FoneMed will refer the patient to our acute care facility or Emergency Department.
 - b. FoneMed records the clinical information given during the call and the outcome of the call in a FoneMed report. The report is faxed to the HealthPoint clinic's medical records department at the beginning of the next business day. This report contains the following: clinic name, call completion time, patient information, assessment followed for protocol of presenting complaint, and care advice per protocol if applicable.
 - c. The medical records department attaches the FoneMed report to the patient's chart in the EHR system and assigns it to the patient's provider.
 - d. The FoneMed report and any further HealthPoint communication between provider, patient, or outside facility will be documented in the patient's electronic health record.

C. Clinical Advice During Office Hours and After-Hours by Secure Electronic Message

- 1. All patients have access to timely clinical advice by secure electronic messages.
 - a. Care Team members receive secure electronic messages from the patient via the Patient Portal through a web encounter the equivalent to a telephone encounter. The Patient Portal instructs those who are sending messages to the practice to "please use messages for non-urgent communication only."

2 / 4

- ROUTINE or non-urgent messages should be returned on the same day, if possible, and always within one business day of receiving the message.
- b. A designated team member on the Care Team receives the message and determines whether he/she can manage the request using appropriate protocols or if it must be forwarded to the provider.
- c. If the message is forwarded to the provider, he/she will respond directly to the patient or task a designated team member with instructions on how to respond to the patient.
- d. Staff documents any action taken regarding the message in the web encounter in the EHR system.
- e. When all actions are complete, the web encounter is marked as addressed.

REPORTING:

ATTACHMENTS/ENCLOSURES:

24/7 Access to Clinical Advice Process

HealthPoint can track timeliness of call response through the EHR. The electronic health record time stamps all telephone encounter responses in the patient's health record. Our goal is to achieve 50% of timely response (i.e. Routine – within one business day, High Priority – within two hours) to patients' phone calls and secure electronic messages. HealthPoint will audit high priority and routine telephone encounters and secure electronic messages quarterly.

RELATED POL	ICY:
REFERENCES: See als	60
Required by: 2014 I	PCMH Standard 1 Element B: 24/7 Access to Clinical Advice

3 / 4

POLICY/PROCEDURE TRACKING FORM

TITLE: 24/7 Access to Clinical Advice									
Scope/Purpose: Scope/Purpose: To ensure a timely response to telephone calls and secure									
electronic messages during and after office hours									
Division/Departm			Policy/Procedure #:						
Original Date: Ju	· • · · · · · · · · · · · · · · · · · ·		_XNewReplacement for:						
Date Reviewed:	Date Revised:	Implementation:		CPIC	Board				
				Approved:	Approved:				
	August 21, 2014	December 1, 2014		August 26, 2014					
Date of Revision Description of Changes									

: 4 / 4