



# Escalation Policy

Mastercall Healthcare  
2016/17

Mastercall Healthcare is the provider of a range of 'out of hospital' urgent care services. We are committed to providing SAFE, EFFECTIVE, HIGH QUALITY, patient centred care at all times.

We proactively manage capacity vs demand using a range of sophisticated and intelligent business intelligence tools, including real-time dashboards that provide accurate information on call volume, response times and can intuitively monitoring demand against specific parameters, in particularly the expected demand for that current moment in time using historical data forecasting and predictions.

Our 'Early Warning Indicator' dashboard is monitored on a daily basis to assess the demand on the service and the types of conditions that are prevalent. The clinical conditions monitored on a daily basis are Influenza/Respiratory (COPD)/Gastro (D&V), Chickenpox/Meningism/Measles

Rotas are meticulously planned 4 monthly in advance using both current and historical data trend analysis and our own Early Warning Indicator data. Rotas are built to reflect daily peak time demands, bank holidays/extended bank holiday weekends and seasonal pandemics.

Every Monday lunch time we hold a Sitrep meeting which consists of :-

Chief Executive  
Clinical Lead for Unplanned Care  
Clinical Lead for Planned Care  
Call Centre Manager and/or assistant manager  
Rota Manager  
Data Scientist/Analyst

The purpose of the meeting is to review the previous weeks demand and performance and forward plan for the coming week(s) taking into consideration current demand, trends, forecast data and other internal/external factors. A detailed review and assessment of the performance of each service against KPI/NQRs is also undertaken and action plans implemented as appropriate.

We are confident that our systems and processes provide a level of resilience that supports our commitment to providing SAFE, EFFECTIVE, HIGH QUALITY patient centre care.

## STATUS 1: GREEN – NORMAL WORKING CONDITIONS

### INDICATORS:

- Activity 10-20% of predicted capacity
- Compliant against NQRs/KPIs
- Full complement of clinicians are rostered and on duty

### MONITORING:

- Daily dashboard activity/week view discussed with senior operational team and Heads of Department
- Early warning indicator data utilised to benchmark predicted activity
- Weekly sit-rep with full operational team chaired by CEO
- Feedback to local economy at resilience / surge conference calls/meetings

### MEETINGS/ACTIONS:

- **Monday Sitrep meeting**
- **Weekly bulletins to teams regarding activity levels**
- **Predictor information for service delivery promoted where possible**
- **Daily activity/performance dashboard closely monitored**

**STATUS 2: AMBER – EARLY SIGNS OF DIFFICULTY/SOME EXCESS PRESSURE REQUIRING SOME EXTRA MANAGEMENT INTERVENTION**

**LEAD PERSON:**  
**Chief Executive**

**SUPPORT PERSON:**  
**CCS Managers**

**INDICATORS:**

- Activity > 20-30% of predicted capacity
- Non-compliant against NQRs/KPIs
- Clinical rota provision poses a low risk

**ACTIONS REQUIRED:**

- CCS Manager to contact the on the on-call clinicians
- CCS Manager to contact 'home workers' to log-in
- CCS Manager to initiate asking GPs to start earlier or stay later
- Daily sit-rep to review escalation process
- Post-event review of escalation at Monday sitrep

## **STATUS 2: AMBER/RED – SIGNS OF DIFFICULTY/EXCESS PRESSURE REQUIRING EXTRA MANAGEMENT INTERVENTION**

### **LEAD PERSON:**

**Chief Executive**

### **SUPPORT PERSON:**

**Operations Management  
Team**

### **INDICATORS:**

- Activity >30-40% of predicted capacity
- Non-compliant against NQRs/KPIs
- Clinical rota provision poses a medium risk
- Actions taken in Amber status have not helped

### **ACTIONS REQUIRED:**

- Director on-call to be notified
- Chief Executive to be notified
- CCS Manager to contact the on the on-call clinicians
- CCS Manager to contact 'home workers' to log-in
- CCS Manager to send SMS text for clinical support to the entire clinical team
- CCS Manager to initiate asking GPs to start earlier or stay later
- CCS Manager to notify:
  - Emergency Departments
  - NHS111
- Daily sit-rep to review escalation process
- Post-event review of escalation

**STATUS 3: RED – PERSISTANT EXCESS PRESSURE REQUIRING SIGNIFICANT ADDITIONAL MANAGEMENT ACTION**

**LEAD PERSON:**

**Chief Executive and Executive Management Team**

**SUPPORT PERSON:**

**CCS Manager**

**INDICATORS:**

- Activity >40% of predicted capacity
- Non-compliant against NQRs/KPIs
- Clinical rota provision poses a high risk
- Actions taken in Amber/Red status have not helped

**ACTIONS REQUIRED:**

- Director on-call to be notified
- Chief Executive to be notified
- Chief Executive to contact all clinical director/managers for front-line support
- CCS Manager to contact the on the on-call clinicians
- CCS Manager to contact 'home workers' to log-in
- CCS Manager to send SMS text for clinical support to the entire clinical team
- CCS Manager to initiate asking GPs to start earlier or stay later
- CCS Manager to notify:
  - Emergency Departments
  - NHS111
  - District Nursing Service
  - CCG Director on-call
  - Agree with CCG re radio comms
- Daily sit-rep to review escalation process
- Post-event review of escalation
- Appointments deferred for routine priority case types
- Patients requiring non-urgent repeat prescriptions to be advised to see pharmacy
- Re-deploy Clinicians from other primary care centres where appropriate to do so
- Contact neighbouring OOH services for reciprocal arrangements
- Employ communications programme informing various neighbouring agencies
- Sitrep to be convened throughout the day at specified times dependent on situation