

## GUIDE TO DIRECT REFERRAL TO THE OUT OF HOURS (OOH) SERVICES

Provision has been made for pharmacists to refer patients directly to the Out of Hours service if they decide the patient needs to be assessed further before their surgery re-opens. This referral should be made directly to the OOH service within the pharmacy board area. The pharmacist (or the patient) does not need to contact NHS 24 at any stage, and using Direct Referral will improve the patient journey. Patients who require emergency dental triage should still be advised to call NHS 24.

### How to refer patients requiring treatment/support in the OOH period

Who you wish to refer to	How to refer the patient	Why you would refer the patient here
Local OOH Service  PCEC – Primary Care Emergency Centre MIU – Minor Injuries Unit CPN – Community Psychiatric Nurse DN – District Nurse	Professional to professional number  <b>See Section 6 for contact numbers</b>  Number can also be used to discuss referral options. Please do not advise the patient to contact NHS 24.	To arrange a consultation at PCEC or MIU  To organise a prescription for medication not eligible for supply under PGD or emergency supply legislation  To query a prescription written in the OOH period  To arrange for patient to see CPN or DN
Accident and Emergency (A&E)	Send patient direct (May require ambulance transport via 999)	A&E appropriate referrals, e.g. suspected fracture
Emergency Ambulance	Ambulance transport via 999	Serious symptoms presenting in Pharmacy
Social Services	Check local arrangements	Child protection issues Community care
Dental treatment	Advise patient to contact NHS 24	Dental triage and potential requirement for emergency dental treatment

### What happens when a referral is made to the OOH Service

The call will typically be answered by a non clinician who will ask for the person's name, date of birth, address, postcode, name of their doctor and practice. Use the referral form in section 7 to collect this information and record the time and location of the appointment.

They will also ask for a brief description of their symptoms and how quickly they need to be seen. Most patients who have initially presented in a pharmacy would usually need to be seen within a 4 hour time frame; however, this may vary according to the demands placed on the OOH service.

The OOH service will then give an appointment time and location where the patient can best be seen. A few boards operate slightly differently to this:

For patients in Greater Glasgow and Clyde (plus Helensburgh, Lochgoilhead, Arrochar, Garelochhead and Kilcreggan) - patients should be **sent directly** to the nearest Primary Care Emergency Centre (section 6) with the completed referral form (section 7).

For patients in Lothian and Borders - Pharmacists should ask to **speak to a doctor** rather than making an appointment. If no doctor is available immediately, you will be phoned back as soon as possible.

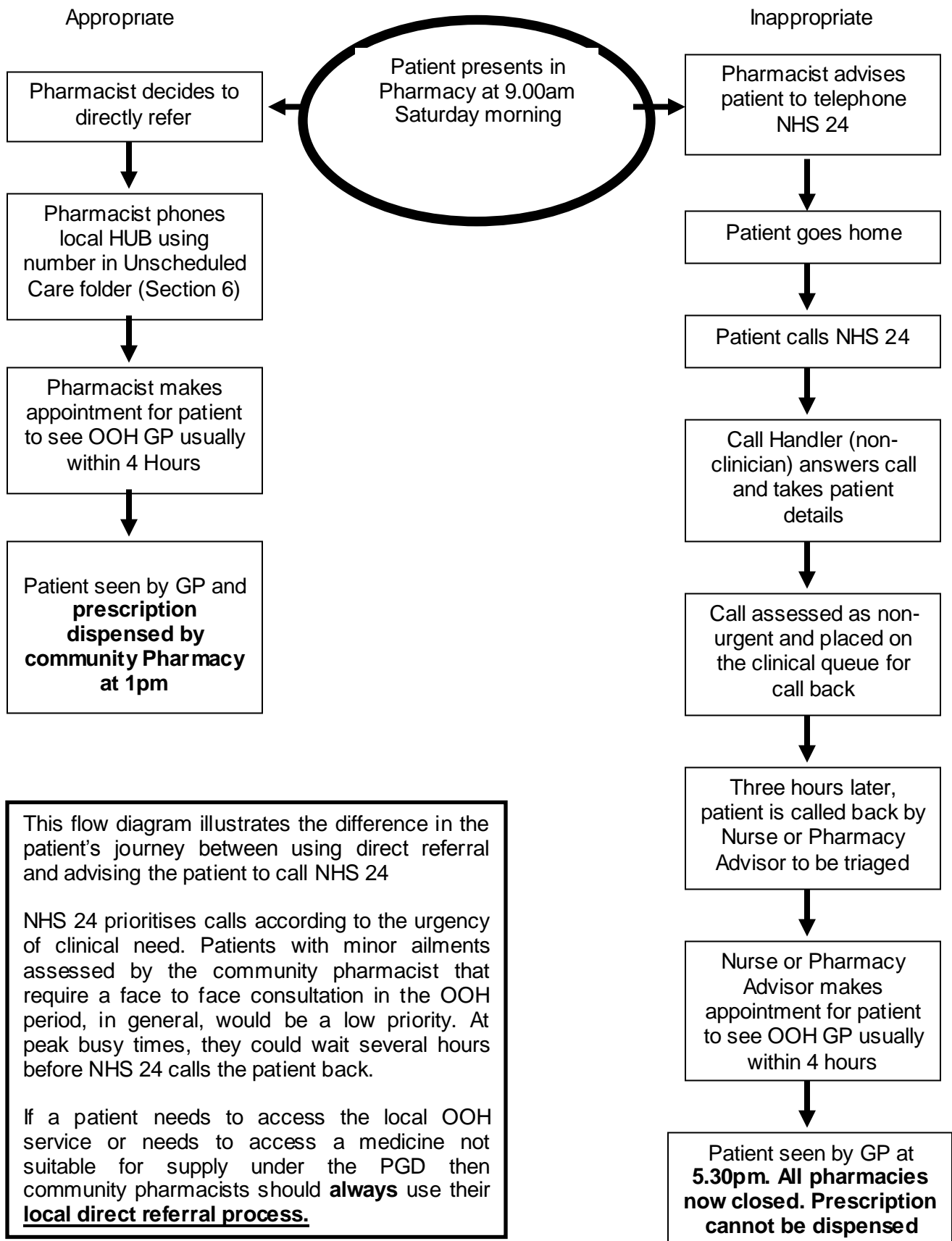
For patients in Forth Valley – Pharmacists should **follow local guidance** issued by Forth Valley OOH service

**Please do not** give anyone the OOH professional line number. Please avoid raising patients' expectations. For example, do not tell the patient that you think they need antibiotics or that they need to be seen urgently by a doctor, instead, tell the patient that you think their symptoms need to be assessed.

### Reasons for Contacting the OOH service

- Make an appointment for the patient who requires face to face consultation.
- Request a prescription for an item not covered by the PGD or emergency supply legislation (OOH will not prescribe substitution therapy).
- Discuss whether patient referral for an appointment is appropriate or a prescription is required for the patient's condition.
- Query a prescription written during the OOH period.

# Patient Journey



This flow diagram illustrates the difference in the patient's journey between using direct referral and advising the patient to call NHS 24

NHS 24 prioritises calls according to the urgency of clinical need. Patients with minor ailments assessed by the community pharmacist that require a face to face consultation in the OOH period, in general, would be a low priority. At peak busy times, they could wait several hours before NHS 24 calls the patient back.

If a patient needs to access the local OOH service or needs to access a medicine not suitable for supply under the PGD then community pharmacists should **always** use their **local direct referral process.**