Ambulatory Care Network
HEALTH SERVICES · LOS ANGELES COUNTY Quality · Compassion · Responsibility

TITLE: Access to Clinical Advice

DIVISION: Ambulatory Care Network

SERVICE AREA/ UNIT: Administration

Policy & Procedure	ACN	
Number	GA-01.004	
Origination Date:	01/11/2016	
Revision Date:	03/14/2019	
Review Date:	06/13/2019	
Approved By:	ACN P&P	

1.0 PURPOSE:

To establish a process and provide access standards for clinical advice via an electronic system or by telephone, with accompanying medical record documentation.

2.0 POLICY:

Each Ambulatory Care Network (ACN) facility will ensure that primary care patients have access to clinical advice in a timely manner, appropriate for the nature of the member's condition, and consistent with good professional practice. Clinical staff will document all clinical advice interactions in the patient record. Clinicians without remote access to the electronic medical record, and therefore using an alternate system of documentation for after-hours clinical advice, will reconcile health information with the medical record on the next business day.

3.0 DEFINITIONS:

- 3.1 Clinician: An individual licensed at the level of RN, PA, NP, or MD.
- 3.2 **Regular Business Hours**: Monday through Friday with hours as specified by each practice and excluding holidays.

4.0 PROCEDURE:

- 4.1 Clinical advice via electronic system Patient Portal
 - 1. Patients may submit requests for clinical advice via the Patient Portal 24 hours day/seven (7) days a week.
 - 2. Patients are informed by the system that the Patient Portal is not for inquiries of an urgent or emergent matter.
 - 3. Received messages will be answered by designated staff within three (3) business days.
 - Clinically related messages will be reviewed by appropriate clinical personnel;

- b. Non-clinically related messages will be reviewed by clerical staff;
- c. Messages requiring provider review will be forwarded to the appropriate provider.
- d. All clinical messages should be saved to patient's chart.

4.2 Clinical advice by telephone

- 1. All facilities will direct callers to the nearest ER or 911 for life-threatening emergencies.
- 2. Each ACN facility will provide patients with mechanisms for access to a licensed clinician for clinical advice during regular business hours.
 - Call center agent transfers calls from patients or caretakers for nonemergent inquires to the appropriate clinician.
 - b. For calls that are not immediately answered, call center staff will initiate an ORCHID message and send to the appropriate clinic staff for review. Clinic staff will contact the patient or caretaker in a timely fashion according to the patient's medical needs and consistent with professional practice standards, but no later than the end of the same business day.
- 4.3 Each ACN facility will provide patients with mechanisms for access to clinical advice from a licensed clinician outside of regular business hours.
 - 1. Patients will be informed to call the facility phone number.
 - Patients will be prompted to choose the option to be connected with a nurse advice line for managed care patients.
 - b. Patients may choose to speak with an on-call physician. For patients who wish to speak with the on-call physician, the patient will leave a message with the answering service, who will page the on-call physician to return the patient's call.
 - c. After hours calls will be returned to the patient within 30 minutes.

4.4 Documentation

- 1. All interactions with and the advice provided to the patient during regular business hours will be documented in the electronic medical record.
- 2. All interactions with and the advice provided to the patient outside of regular business hours will be documented, utilizing one of the following options:
 - Via remote access to the electronic medical record; or
 - Via an alternate system of documentation that is reconciled with (documented or scanned into) the electronic medical record the next business day.
- Documentation will include:
 - Patient Name
 - b. MRN#
 - c. Date of Birth
 - Date/time the call was received.
 - e. Date/time provider responded to the call.

- f. Reason for the call.
- Advice (assessment/plan) given to the patient.
- h. Provider on call will send an ORCHID message to the responsible clinician as appropriate detailing the call.

5.0 MONITORING:

- 5.1 Each facility will monitor the timeliness of the response to the patient's request for clinical advice via telephone and / or Patient Portal against the defined standards.
 - 1. Turnaround time data will be reviewed on a quarterly basis.
 - 2. Appropriate management will review.

6.0 SOURCES AND REFERENCE:

6.1 ACN Patient Centered Medical Home Manual (2012)

7.0 AUTHORITY:

7.1 National Committee for Quality Assurance, Patient-Centered Medical Home Standards & Guidelines

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P&P History

Date	Department	Policy & Procedure #	Comments	Next Annual Review Due
1/11/2016	ACN	N/A	Draft prepared	-
2/22/2016	ACN	GA-01.004	ACN P&P approved	2/22/2017
4/12/2018	ACN	GA-01.004	Reviewed	4/12/2020
3/14/2019	ACN	GA-01.004	Revised	3/14/2022
6/13/2019	ACN	GA-01.004	Reviewed	6/13/2022