



## CLINICAL POLICY

### Timely Clinical Advice by Telephone for the Ambulatory Medical Practices

**A. EFFECTIVE DATE :**

January 2020

**B. PURPOSE :**

To assure consistent and timely clinical advice in response to patient telephone inquiries.

**C. POLICY :**

- All incoming patient telephone calls will be evaluated for level of urgency using the Clinical Liaison Response Grids during normal business hours (Monday – Friday, 8:00 AM to 4:30 PM).
- Clinical issues identified as urgent in the response grid will be transferred to the practice iPhone for immediate action.
- Non-urgent issues will be recorded in the Epic telephone log to be responded to by the end of the day if possible.
- Calls received outside of normal business hours seeking urgent clinical advice will be directed to the on-call provider by the telephone operators.
- All calls from patients with an EMR chart must be documented in the EMR telephone call module.

**D. SCOPE :**

Staff in the UConn Health Ambulatory Medical Practices, Call Centers and Contracted Answering Services

**E. DEFINITIONS :**

Ambulatory Medical Office Practices Clinical Staff Members includes: RNs, LPNs, MAs, Ophthalmology technicians APRNs and PA's.

**F. MATERIAL(S) NEEDED :**

Clinical iPhone with power cord.  
Clinical Response Grids

**G. PROCEDURES:**

#### CLINICAL iPHONE

1. Assigned medical office staff will assure that the iPhone is fully charged, activated and that the ringer function is turned on at the beginning of each day of operations.
2. The Clinical iPhone needs to be carried on the person of a staff member at all times during normal business hours (8 AM to 5 PM)

3. Registered Nurses will be assigned to carry the iPhone whenever possible.
4. When an RN is not physically present in the practice the iPhone will be carried by another assigned staff member.
5. The staff member carrying the iPhone will handle the call within the scope of practice for their role.
  - a. RNs will use nursing assessment to evaluate the needs of the caller and recommend a course of action consistent with the nurse's scope of practice. RNs will consult providers for situations requiring a higher level of intervention.
  - b. LPN's, MA's and Ophthalmology Technicians will answer the phone and immediately find a RN or provider who can assess the patient situation.
6. All calls received via the iPhone need to be documented in the patient call log.
7. At the end of business hours, the staff member assigned to carry the iPhone will connect the phone to the charger and plug in to a power source to assure that the iPhone will be fully charged for the next business day.
8. All malfunctioning phones will be reported to telecommunications for immediate replacement. The call center should be notified that the phone is out of service and an alternative number should be identified for use by the call center in the interim.

#### **DOCUMENTING PATIENT TELEPHONE CALLS REQUESTING NON-URGENT CLINICAL ADVICE**

1. Incoming patient requests for clinical information will be evaluated utilizing the Clinical Liaison response grid for the practice contacted.
2. Calls that have been categorized as urgent on the response grid will be directed to the clinical iPhone for immediate assistance.
3. All other calls from patients requesting clinical advice with established patient medical numbers and are set up in Epic will be documented in the telephone encounter section of the patient chart per the established work flows. See "Attachments" section of this procedure for workflow Tip Sheets.
4. Patients with medical record numbers who have pending appointments with providers but who have not yet had an initial visit are included in this documentation workflow.
  - a. Business email (Outlook) should not be utilized to communicate requests for clinical advice or other clinical concerns.
  - b. Requests for medication refills, laboratory testing or radiology orders from patients not yet seen by the providers being contacted will be referred to their prior prescriber.

#### **H. ATTACHMENTS/FORMS**

Documenting Telephone Calls in Epic - [\\epic-](https://epic-nas.et0996.epichosted.com/static/LearningHome/Cadence/Documenting%20Telephone%20Calls%20tip%20sheet%205.2.18.pdf)

[nas.et0996.epichosted.com/static/LearningHome/Cadence/Documenting Telephone Calls tip sheet 5.2.18.pdf](https://epic-nas.et0996.epichosted.com/static/LearningHome/Cadence/Documenting%20Telephone%20Calls%20tip%20sheet%205.2.18.pdf)

Selecting Reason for Telephone calls in Epic - [\\epic-nas.et0996.epichosted.com/static/LearningHome/EpicCare Ambulatory/Telephone Calls-Reason for Call.pdf](https://epic-nas.et0996.epichosted.com/static/LearningHome/EpicCareAmbulatory/Telephone%20Calls-Reason%20for%20Call.pdf)

Documenting Medication Refills Requests - [\\epic-nas.et0996.epichosted.com/static/LearningHome/Grand Central/Tip Sheets/Documenting Med Refill Calls tip sheet 5.2.18.pdf](https://epic-nas.et0996.epichosted.com/static/LearningHome/Grand%20Central/Tip%20Sheets/Documenting%20Med%20Refill%20Calls%20tip%20sheet%205.2.18.pdf)

[Clinical Procedure - Managing Telephone Calls from Patients with Suicidal/Homicidal Ideation](#)

#### **I. REFERENCES :**

None

#### **J. SEARCH WORDS :**

Telephone Triage, Medical Advice, Patient Calls. iPhone, Scope of Practice

**K. ENFORCEMENT:**

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

**L. STAKEHOLDER APPROVALS :**

On File

**M. COMMITTEE APPROVALS :**

None

**N. FINAL APPROVAL :**

- |   |                           |
|---|---------------------------|
| 1. <u>Andrew Agwunobi, MD (Signed)</u><br>Andrew Agwunobi, MD<br><b>UConn Health Chief Executive Officer</b>              | <u>04/27/2020</u><br>Date |
| 2. <u>Anne D. Horbtauck (Signed)</u><br>Anne D. Horbatuck, RN, BSN, MBA<br><b>Clinical Policy Committee Co-Chair</b>      | <u>03/10/2020</u><br>Date |
| 3. <u>Scott Allen, MD (Signed)</u><br>Scott Allen, MD<br><b>Clinical Policy Committee Co-Chair</b>                        | <u>04/09/2020</u><br>Date |
| 4. <u>Caryl Ryan, (Signed)</u><br>Caryl Ryan, MS, RN<br><b>VP Quality and Patient Service &amp; Chief Nursing Officer</b> | <u>03/18/2020</u><br>Date |

**O. REVISION HISTORY :**

Approved: January 2020

Revised: March 6, 2020