



How do we respond to over 1,000 emergency calls a day?

With 'Right Care, Right Time'.



St John

first to care

Our 'Right Care, Right Time' response system brings more focus to where it's needed - on your patients' needs.

What does 'Right Care, Right Time' mean for your patients?

Last year we responded to two-thirds of the 366,509 emergency 111 calls we received as immediately life threatening. Yet, 80% of these were later diagnosed as mid to low acuity. Incomplete information from callers - including primary care callers - was a key contributor to this.

In August 2012 we introduced the 'Right Care, Right Time' response system. The reason was to align our emergency response resources to better meet the health needs of our communities. It means getting to genuine high acuity patients faster and offering alternative pathways to care for low acuity patients.

'Right Care, Right Time' - typical responses to patient presentations

Patient acuity	Urgency	Example presentations	Response	Notes to clinics
High	Immediately life threatening	Cardiac arrest, severe shortness of breath, symptomatic myocardial ischaemia, shock or unconsciousness	An ambulance dispatched immediately with lights and sirens	
	Time critical	Fractures (or dislocations) with distal limb ischaemia, or stroke with symptoms less than 3 hrs since onset (ie possible thrombolysis candidate)		
Mid	Urgent but not immediately life threatening nor time critical	Pneumonia without severe shortness of breath, abdominal pain without shock and meningitis with a normal level of consciousness	An ambulance dispatched immediately at normal road speed	In some cases the responding crew may upgrade the response to under lights and sirens
Low	Non-urgent	Soft tissue infections without signs of septic shock, fractures without distal limb ischaemia, stroke with symptoms that have been present too long for the patient to be potentially a candidate for thrombolysis	An ambulance dispatched when available	If not safe for patient, or if patient condition changes, update St John. We will re-evaluate and may prioritise a more urgent response

'Right Care, Right Time' in action

Health professionals play an important role when requesting emergency care for their patients. That's why we've streamlined the 111 process for you with 'Fast-track'. Fast-track recognises your ability to provide a clinical diagnosis on your patient's condition over the phone. Here's how it works...



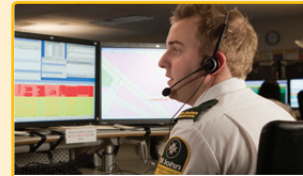
A 111 call comes in

Fast-track process used if the caller is from a GP practice, calling 111 on behalf of a patient:

Fast-track



The caller should preferably be a doctor, registered nurse or midwife



Two key questions to answer:
1. Is it immediately life threatening or time critical?
2. What is your diagnosis?



The most appropriate response will be initiated by St John

1. Options depend upon need
2. Not all ambulance responses will be with lights and sirens
3. Not all responses will include an ambulance*

*Applies to standard 111 process only

Standard 111 process if the caller is a member of the public:



A series of questions are asked to determine the patient's condition and acuity. This will take longer than the 'Fast-track' process for health professionals.

Success right from the start

During the first 6 months of implementation, 'Right Care, Right Time' has already produced better outcomes in the community, particularly for high acuity patients:

Better identification of genuine high acuity patients over the phone:

36% fewer unnecessary lights and sirens responses

(equivalent to 88,000 responses per year)



Response time to life threatening/high acuity patients:

Improved by 18%

(equivalent to over 2½ minutes faster)



Source: St John data

“Primary care plays a vital role in the health and wellbeing of all New Zealanders because we are the health professionals that people see most often. Responding in a timely way to the changing health needs of our communities requires a focus on continual improvement.

The 'Right Care, Right Time' response system is focussed on improving the provision of ambulance services in New Zealand. We believe that it is crucial for us to get the ambulance response right – right for the patient and right for the health system. This is where GP practices can assist because they make up one of the largest categories of emergency calls that we receive. When calling on behalf of a patient, we ask that whenever possible, the call is made by a clinical person: a registered nurse, doctor or midwife. This maximises the clinical information we receive and ensures that swift assistance is delivered in the community to where it's most urgently required.”

Dr Tony Smith, St John Clinical Director.



Alternative care for low acuity patients

St John is already reviewing ways to better cater to the needs of low acuity patients and will keep you informed on developments. The key will be to have alternative ways of meeting your patients' needs.

Initiatives currently being piloted include:

Secondary triage:

A team of clinically trained staff are forwarded low acuity 111 calls. They help the caller resolve the issue by offering alternatives to an ambulance. This may include self-care advice or a recommendation to see their GP.

Alternative response vehicles:

Vehicles other than ambulances are focused on low acuity cases that have been identified as unlikely to require transport. Patients receive care sooner and nearer to their home, if not in their home. Where appropriate, closer primary care providers are used for care, rather than transporting the patient to hospital.

St John Medical Alarm - vital as ever for elderly patients

While 'Right Care, Right Time' has improved our response, it still relies on a 111 call. For elderly patients living alone, a medical alarm remains the best way of getting help if they can't get to the phone in an emergency. If they have a St John Medical Alarm, their call for help comes directly to us. It is also reassuring to know that when they push their button - should we be unable to make contact with them - we will send an ambulance to their home.

