The Application of an Alert to a Patient Record in RiO briefing paper

Introduction

The application of the 'Alerts' functionality within a system wide Electronic Patient Record (EPR) can improve patient care and the safety of staff and members of the public. This functionality can be used as a method of highlighting vitally important clinical, social or safety factors that may need to be taken into account for individual patient care. To deliver maximum benefit from the implementation of RiO, a standardised approach needs to be adopted across all clinical services; including those services which are not using RiO as their primary care record. This applies to both the creation and application of alerts to a patient's medical record and to reviewing and managing active alerts.

Principles:

It is good practice for patients and their legal proxies to be aware of any alerts being considered or applied.

All patients and their legal proxies have the right to challenge the application of any alert applied to their records.

Health Care Practitioners (HPC) and their clinical leads and managers need to be aware of the care and legal consequences of applying alerts.

> **Looked After Children Alerts**
>
> These alerts should only be added or removed by the Looked After Children Team.
>
> If a patient is identified by you as being a looked after child and there is no alert then a formal referral should be made to the looked after children team.

Responsibilities

It is the responsibility of all staff:

- To be aware of the types of Alerts that are within the RiO system
- To consider the significance of the Alert and any possible consequences both clinical and legal
- To apply appropriate Alerts to patient clinical records and to monitor the continued relevance of the Alert
- To remove an Alert if it is if no longer appropriate.
- To be aware that wherever possible patients and their families should be made aware of any Alerts that are being considered and applied
- To be aware that the majority of clinical care alerts: spiritual, dietary need, phobia, gender, sexuality should only be applied at the request of the patient or their legal proxy
- To be aware that information relating to accessible information standards alerts will typically be provided by the patient or their carer/legal proxy
- It is the responsibility of team leaders and line managers to ensure staff are aware of who to contact in relation to violence and aggression Alerts and their application

Risk Management

Higher Risk Decision: Safeguarding Adult /Child Alert sub category: Risk to Staff Alert / Violence or Aggression

All staff must undertake a dynamic risk assessment in the application of this alert when it applies to the: Safeguarding Adult /Child Alert sub category: Risk to Staff Alert / Violence or Aggression

Process for Higher Risk Alert Decisions:

Safeguarding Child

- If a child becomes the subject of a Child Protection Plan, an Alert must be added by the Health Care Practitioner to the Child's clinical record following a child protection case conference. In addition the staff member applying this alert must complete a shortened Datix and notify their Children's Safeguarding lead.

In all other cases

- Staff must inform their line manager /person in charge and request the application of an 'Alert' to be applied to a patient's record

- It is the responsibility of the line manager/person in charge to review and consult with the Caldicott Guardian to confirm the application of the Alert

- Out of hours the Manager on call should be informed that a 'Violence and Aggression Alert' has been temporarily applied to a patient's record and agree a process to review date within 5 days that includes discussion with the Caldicott Guardian

- The Manager on call must log the alert application and rationale, notify the Caldicott Guardian and service manager by email

- It is the responsibility of the service manager to review the application of this Alert with the Caldicott Guardian when normal working hours resume

Process for all other Alerts

Patient Alerts need to be managed by individual practitioners and the services they work within; health care practitioners are responsible for adding and closing alerts on the RiO system, with the exception of any Looked after Children (LAC) alerts, which are managed by the LAC team.

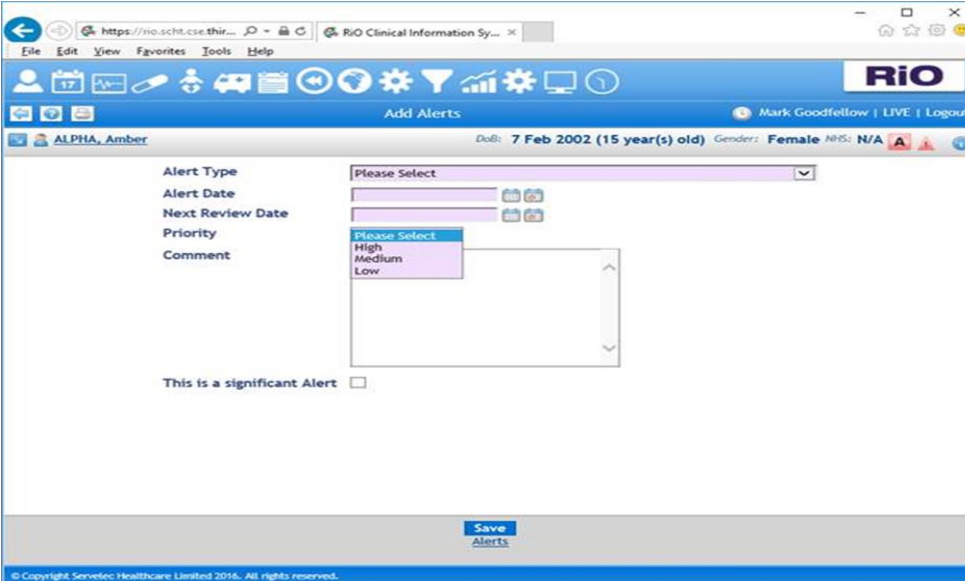The Trust utilises standard Alert Types under each of these Alert Categories:

- Accessible Information Standards
- Clinical Care
- Clinical Record
- Environmental
- Falls
- Infection Prevention Control
- Legal
- Safeguarding Adult
- Safeguarding Child

Within RiO Alert Categories have been established for two main purposes

1. As a signpost to all Health Care Practitioners for information that a patient would like us to know. These alerts and their Alert Content are applied to the record at the request of a patient or on their behalf by a legal proxy. They need to be managed through discussions with the patient and with their agreement. These alerts are organised within Accessible Information Standards Alerts and Clinical Care Alerts. Such an alert might relate to a patient's spiritual needs for example or modifications they may require for appointments.

2. For Health Care Practitioners to identify and share significant information required to support safe patient care and staff and public safety.

The Alert Type provides insufficient information about the nature of the alert and the recommended actions/considerations required. It is important therefore to also include relevant information alert within the Alert Content. This includes (but is not limited to):

- Specific details about the risk; to expand on the Alert Type
- Actions that staff need to take; for example, two staff members to be in attendance at each contact and how to obtain further details; for example, contact the Safeguarding Team

Alert Monitoring

Once an Alert is raised it must be monitored and removed as soon as it is no longer relevant. With the exception of permanent alerts for example a patients non reversible disability, all alerts must be allocated a timely review date in line with your risk assessment or the patient's request.

Where the Alert Type remains valid but the Alert Content is required to be updated it is the responsibility of each HCP to update the information according to their risk assessment or the patient's request.

Service leads will be expected to run regular live reports in Rio to establish an effective system for monitoring the application and continued use of Alerts in their service. How to undertake this can be found in the guide to Alerts

Alert Removal

Where the Alert Type is no longer valid it is the responsibility of each HCP to amend the record. If appropriate the HCP should notify the team or service lead.

Additional Information

Service leads should establish systems that monitor the active Alert status locally to ensure that it remains contemporaneous and relevant on a patient's clinical record.

Adding an Alert Quick Reference Guide

Quick Reference Guide "Alerts Allergies Conditions Diagnoses RiO QRG": http://www.shropscommunityhealth.nhs.uk/content/page/24950/Alerts%20Allergies%20Conditions%20Diagnoses%20RiO%20QRGV2.pdf

References:

- Data Protection Act (DPA) 1998
- General Data Protection Regulation 2016
- Health and Safety at Work Act 1974
- Records Management Code of Practice for Health and Social Care 2016