

# ER24

Mediclinic Facility Support – Sourcing bed  
availability

## Document Information

Criteria	Details
Document title:	User guide Mediclinic Facility Support – Covid 19
Document owner:	Sivern
Document author:	Sivern
Version:	1.1
Issue date:	14 December 2020

## Glossary & Acronyms

Name/Position.	Description
IVR	Interactive Voice Response
IFT	Inter Facility Transfer
ERO	Emergency Response Officer

# 1. PURPOSE

The purpose of this document is to guide Contact Centre agents to source bed availability for calls received from the Mediclinic Facility Support line (010- 2053007) for line.

1. To source bed availability for calls received from Mediclinic Facility Support line, CC agent referring to Master-data hospital list (attached).



ER24CC\_Command  
Centre Contact List\_

- 2.
3. To log IFT phone requests and web requests, once bed sourced
4. To process IFT request
  - Approve
  - Reject
  - Escalate
  - Verify & Validate
  - Assign vehicle

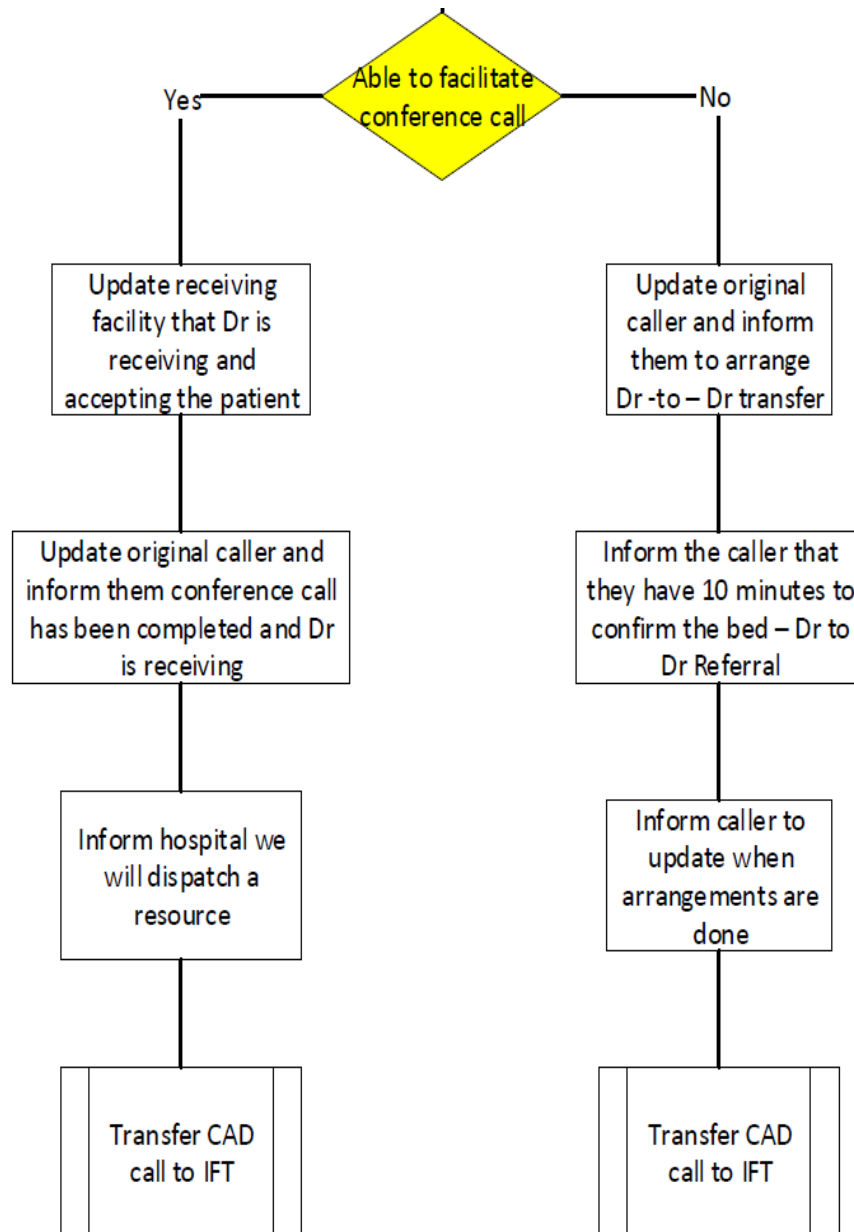
## 2. Sourcing Hospital Call Back Process (Contact Centre Admin Agent)

1. Contact Centre agent to identify requesting Hospital and establish if there is a hospital preference for the patient to be moved to. 112/124 Contact centre agent to start capturing request.
  - a. 112 Agent to use Web-form to log case
  - b. 124 Agent to use CAD to log case
2. Establish why patient is required to be moved, identify what specialist Doctor and equipment is required. Confirm with caller if 3 preferred hospitals. Confirm if the patient must go to private or public hospital. Medial Aid to be conformed if applicable.
3. Complete IFT clinical process
  - a. Is patient on ventilation – Yes
    - i. What type of ventilation
    - ii. CPAP or on a ventilator
  - b. What percentage of oxygen is patient on?
  - c. Patient not on ventilation-
    - i. Is patient on oxygen – Yes

## Mediclinic Facility Support

1. What type of oxygen
  2. Nasal Cannula?
  3. Airvo?
  4. High-flow oxygen?
  5. Mask?
  6. Percentage or litres of oxygen?
- d. Logging for a baby – Yes
- i. Baby on ventilation – Yes
    1. Is CPAP?
    2. Ventilator?
    3. Oscillator?
    4. Percentage or litres of oxygen?
4. Identify which hospitals in region/province is on divert, refer to divert list on CAD.
  5. Identify X 3 hospitals
    - a. Use Mediclinic Hospital Bureau to source hospital and equipment availability.
      - i. <http://bedusage/>
    - b. If Mediclinic Hospital Bureau unsuccessful, use Command Centre contact list (attached point 1) for respective region/province. Refer to Google Maps to identify the closest hospital as well.
  6. 124 Call Agent to complete IFT CAD process and 112 Call agent to complete Web-Form online process.
  7. Start calling identified hospital using AVAYA/CAD (recorded line) from Mediclinic Hospital Bureau and Command Centre contact list, use google maps to establish if hospital has required specialist Doctor.
    - a. Call the hospital number and request to speak to the Duty Manager, if no contact made, contact the (Command Centre) number, if no contact made, contact the HGM.
  8. If the 3 identified hospitals have no beds available, required Doctor and equipment e.g. ventilator, agent to start sourcing hospital (repeat point 4) and if still unsuccessful use Google to source hospitals (soft channelling process).
  9. If a hospital cannot be sourced, every 30 minutes Contact Centre agent to escalate to Team Leader. Team Leader to provide feedback to the referring hospital and inform them we are still sourcing a facility.
  10. Call Centre agent to continue with process. Make contact with 10 hospitals.
  11. Once a hospital has been located, confirm ward/bed/receiving doctor name?
  12. Capture receiving hospital details on CAD.
  13. Inform the receiving hospital to book the bed and provide patient details.

14. Call centre agent to facilitate a conference call with transferring and receiving doctors. Follow outset process.



15. After 10 attempts if no hospital was sourced follow escalation process.

- a. If a hospital cannot be sourced, every 30 minutes Contact Centre agent to escalate to Team Leader. Team Leader to provide feedback to the referring hospital and inform them we are still sourcing a facility.
- b. Call Centre agent to continue with process until a hospital is located.
- c. After 10 hospitals have been tried with no bed and or equipment availability agent to escalate to Team Leader.
  - i. Team Leader to escalate relevant Mediclinic Regional Clinical Manager

Mediclinic Facility Support

- ii. Regional Clinical Manager not available, Team Leader/Contact Centre manager to escalate to relevant Mediclinic Operational Executive

### 3. 112 Agent process IFT Web form to be used to capture.

1. Contact Centre agent to access IFT web form using ER24 website  
<https://www.er24.co.za/en/corporate/home.html>
2. Contact Centre agent to click "Log an IFT" then click on "click here to book an IFT online"



3. Contact Centre agent to complete IFT form online and complete all fields.
  - a. Patient information
  - b. Transport
    - i. If facility cannot be sourced use "other" to complete process
    - ii. Use Corporate office address 371 Rivonia Boulevard, Rivonia.
    - iii. IFT agent to give the case number to the dedicated agent to source a receiving facility as per the process.
  - c. Clinical Data
  - d. Reason for transfer/remarks
  - e. Identify what equipment is required
4. Contact Centre agent to submit request and request is sent to IFT stack.

The image shows a screenshot of the "IFT Form" with a blue header. Below the header is a section titled "Patient Information" with a light blue background. The form contains the following fields:

Your Name:*	<input type="text"/>	Last Name:*	<input type="text"/>
Title:	--SELECT--	ID No.:	<input type="text"/>
First Name:*	<input type="text"/>	Date of Birth:	14 Dec 2020
Gender:*	--SELECT--	Medical Aid No.:	<input type="text"/>
Age:*	<input type="text"/> Years	Medical Aid Plan:	--SELECT--
Contact Number:*	<input type="text"/>		

# Mediclinic Facility Support

Transport			
<b>From</b>		<b>To</b>	
Country*	South Africa	Country*	South Africa
Facility*	--SELECT FACILITY-- <input type="checkbox"/> Other	Facility*	--SELECT FACILITY-- <input type="checkbox"/> Other
Province*	--SELECT PROVINCE--	Province*	--SELECT PROVINCE--
Town	--SELECT TOWN--	Town	--SELECT TOWN--
Address		Address	
Contact no.		Contact no.	
Complex		Complex	
Floor/Room/Ward		Floor/Room/Ward	
Closest Landmark		Closest Landmark	
Referring Doctor		Receiving Doctor	
Pickup Date*	14 Dec 2020	Appointment Date*	14 Dec 2020
Pickup Time*	08:59	Appointment Time*	08:59

Clinical Data			
Ventilation*	No	INTRAVENOUS LINES*	None
Syringe Drivers*	No	Infusion Pumps*	No
Incubator*	No	Urinary Catheter*	No
Oxygen*	No	Blood Pressure Systolic	
Blood Pressure Diastolic		Pulse	
SPO2		Respiratory Rate	
GCS		HGT	
Temp		HB	



Clinical Data

<input type="text"/>	<input type="text"/>	<input type="text"/>
High Risk Diagnosis <input type="text" value="None"/>	Diagnosis <input type="text"/>	
Date of Admission <input type="text" value="14 Dec 2020"/>	Is the patient in isolation <input type="text" value="No"/>	
Reason for patient isolation <input type="text"/>	Number of Infusion Pumps <input type="text"/>	
Reason for Transfer <input type="text" value="--Select--"/>	Additional information for transfer <input type="text"/>	
Confirmed COVID-19* <input type="text" value="No"/>	Person under investigation: respiratory condition/ fever/ COVID-19* <input type="text" value="No"/>	

Reason for transfer /Remarks

\* Fields are mandatory

## 4.124 Agent Process CAD to be used to capture

### ➤ ER24 Client IFT Call Logging

- IFT Agent/ERO:
  - All incoming calls received for an ER24 medical aid IFT, must be logged on CAD with the information provided.
  - The "Notified by" field must be completed as per the dropdown list.
    - SP name is not available on the dropdown list; it must be noted in the case notes.
    - Escalate to TL to ensure that SP name is added to the list.
  - If the call is received from a Service Provider, the caller must be informed that the IFT team will make contact with them (SP) to inform if the IFT has been approved or not.
  - Complete the Caller Information and the Patient sections comprehensively and accurately.
  - Validate scheme and plan
    - Validation of ER24 clients on CAD.
  - IFT checklist to be completed with all the information provided by the hospital.
  - Complete the Transport Details on CAD.
  - Ensure that the specific ward and doctor, with a contact number is captured correctly.
  - Once the details have been captured, the caller must be informed that the IFT approval process can take up to an hour and will be contacted if there are any delays.

## Mediclinic Facility Support

- Provide the caller with the case reference number.
- Escalate the case for approval.
  
- For any life threatening or urgent IFT cases, the relevant tick box on CAD must be marked.
- When the case is logged by ERO, it is to be sent to the IFT team using the appropriate close type.
- **Non-ER24 Client IFT Call Logging**
  - IFT Agent/ERO:
    - When a call is presented from a non-ER24 medical aid, an IFT case must be opened on CAD as per the request.
    - The "Notified by" field must be completed as per the dropdown list.
      - Service Provider name is not available on the dropdown list; it must be noted in the case notes.
      - Escalate to TL to ensure that SP name is added to the list.
  
    - Attention to detail must be exercised when capturing all details received from the hospital.
    - Identify and capture the scheme accurately.
    - For non-life threatening or non-urgent IFT requests, the caller must be informed that the transfer is subject to approval and that we might need to engage with a third party to gain authorisation.
    - Provide the caller with a case reference number.
    - Call the relevant Assistance Company; provide them with the case details and the pick-up time.
    - Once all the details have been provided, confirm with the Assistance Company if the call must be closed or kept open on our side.
    - Follow up with the relevant Assistance Company for authorization within 30 minutes of handing over the call:
      - ❖ If authorization is received
        - Capture the correct authorization number in the space provided as well as the level of care of the transfer.
        - Escalate case for approval.
  
      - ❖ If the case is declined
        - Close the case using the correct close type.
  
    - For life threatening or urgent IFT cases the relevant tick box on CAD must be marked.
      - Refer to **Life threatening/urgent IFT Cases** process.

# Mediclinic Facility Support

Caller Registration Search Calls

---

**Caller Information**

Incident ID: E202012140925    Call Date: 14/Dec/2020 12:55:33 PM    Caller Name:     [IFT Checklist](#)

Count Today: 0 [View History](#)    Notified by: Hospital    Caller Number:     [Ambulance Diversion](#)

Call Category: IFT    Call Sub Category: Upgrade: diagnostic 1 w    Customer Category: Client     VIP     Life Threat     Urgency

Level of Care: --Select-- [View](#)    Site Name: --SELECT--    Client Name: --SELECT--     SelfDispatch     Events

Alt. Number:     Priority: --Select--    Assistance Company:     Contract Type:

---

**Patient Information**  Patient Validated

Title: --SELECT--    First Name:     Last Name:     Date of Birth: 14 Dec 2020

Gender: --SELE--    Age: 0    Year:     ID Number:     Main Member Name:     Main Member ID:

Medical Aid: --SELECT--    Medical Aid No.:     Medical Aid Plan:     Assistance Company:

User Name:     Password:

[Reset](#)

Caller Registration Search Calls

---

**Caller Information**

Incident ID: E202012140925    Call Date: 14/Dec/2020 12:55:33 PM    Caller Name:     [IFT Checklist](#)

Count Today: 0 [View History](#)    Notified by: Hospital    Caller Number:     [Ambulance Diversion](#)

Call Category: IFT    Call Sub Category: Upgrade: diagnostic 1 w    Customer Category: Client     VIP     Life Threat     Urgency

Level of Care: --Select-- [View](#)    Site Name: --SELECT--    Client Name: --SELECT--     SelfDispatch     Events

Alt. Number:     Priority: --Select--    Assistance Company:     Contract Type:

---

**Patient Information**  Patient Validated

Title: --SELECT--    First Name:     Last Name:     Date of Birth: 14 Dec 2020

Gender: --SELE--    Age: 0    Year:     ID Number:     Main Member Name:     Main Member ID:

Medical Aid: --SELECT--    Medical Aid No.:     Medical Aid Plan:     Assistance Company:

User Name:     Password:

[Reset](#)

---

**CheckList**

Ventilation	No	HB	<input type="text"/>
INTRAVENOUS LINES	None	High Risk Diagnosis	None
Syringe Drivers	No	Diagnosis	<input type="text"/>
Infusion Pumps	No	Date of Admission	14/Dec/2020 12:56:5
Incubator	No	Is the patient in isolation	No
Urinary Catheter	No	Reason for patient isolation	<input type="text"/>
Oxygen	No	Number of Infusion Pumps	<input type="text"/>
Blood Pressure Systolic	<input type="text"/>	Reason for Transfer	<input type="text"/>
Blood Pressure Diastolic	<input type="text"/>	Additional information for transfer	<input type="text"/>
Pulse	<input type="text"/>	Confirmed COVID-19	No
SPO2	<input type="text"/>	Person under investigation: respiratory condition/fever/ COVID-19	No
Respiratory Rate	<input type="text"/>		
GCS	<input type="text"/>		

Note: Question in red color indicates mandatory

[Save](#)    [Close](#)

## 5. Case Routed to IFT stack

1. IFT process to be followed once case sent.
2. IFT Agent to follow IFT SOP

The screenshot displays a software interface for IFT (Interim Facility Transfer) management. The main window is titled 'IFT Information' and contains a table with columns for Priority, Incident ID, Sub-Category, Patient Name, From, To, Pictual, Appointment, Approved/Placed, Escalated By, Case Type, Principial, Updated By, Return IFT, and Cancel. The table lists various cases with their respective details. To the right of the main window, there is a smaller window titled 'Call Log' showing a list of call records with columns for Call ID, Call Sub-Category, and Status.

## 6. Escalation Process

1. If a hospital cannot be sourced, every 30 minutes Contact Centre agent to escalate to Team Leader. Team Leader to provide feedback to the referring hospital and inform them we are still sourcing a facility.
2. Call Centre agent to continue with process until a hospital is located.
3. After 10 hospitals have been tried with no bed and or equipment availability agent to escalate to Team Leader.
  - 3.1. Team Leader to escalate relevant Mediclinic Regional Clinical Manager
  - 3.2. Regional Clinical Manager not available, Team Leader/Contact Centre manager to escalate to relevant Mediclinic Operational Executive

## 7. Important rules to be followed

1. Tag Calls on CAD.
2. Remember to escalate to Team Leader

## Mediclinic Facility Support

3. Outbound calls, use CAD.
4. Timeous feedback to be provided to hospitals, ETA and delay feedback to be provided.
5. Always make cases notes and ensure correct spelling and grammar is used.
6. Always provide caller (inbound/outbound) with reference numbers.
7. Select correct Medical aid name/Private/EMS Agreement/Hospital account prior to approval
8. Team leaders to escalate to Regional/ Clinical Manager