NHS Barts Health NHS Trust

ADT01 – Admit a Patient to a Ward		

Date approved	29/08/2018	**Review Date**	February 2020
Effective from	01/09/2018	**Version:**	1.0

CAG/Service	Performance Directorate
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Approving Committee(s)	

Consultation	
Related Policy	Access and Management – Referral to Treatment policy
Standards	DoH Referral to treatment consultant - led waiting times Oct 2015
Superseded Documents	IP 04 – Admit an Elective Patient from TCI List IP 05 – Admit a Patient for Day Surgery
Keywords	Admission, admit, Bed Board, day case, elective, inpatient, TCI, ward
Intranet Locations	

Document Revision Record			
Amendment Date	**Version Replaced**	**Sections Involved**	**Amendments**

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The current version is published on the Trust Intranet website at
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Contents

1. Purpose

1.1. These standard operating procedures provide 'zero interpretation' guidance for staff to follow. By this we mean all of the information required for a staff member to perform a given procedure:

- Business Rules
- RTT Rules
- System workflows and steps
- Non-system workflows and steps if required

1.2. The Trust need clear standard operating procedures (sops) that are detailed, accurate and aim to achieve efficiency, quality output and uniformity of performance. The standard operating procedure is a set of step-by-step instructions to help staff carry out complex routine operations. The standard operating procedures will be owned and updated by the Performance Directorate with input from key Trust stakeholders. These standard operating procedures need to reflect operational processes rather than being based purely on system steps in order to lead to improved data quality. Staff, managers and senior managers need visibility of process performance to empower staff members to take ownership of the processes performed as part of their day to day job and for management to have visibility of their staff members and departments performance. The standard operating procedures, used in conjunction with the reinforcement reports will support good practice going forward and a process of continuous improvement.

2. Scope

2.1. This SOP covers the process of admitting an elective patient with a scheduled TCI date to an admissions unit (e.g. ward, day case unit, admissions lounge) starting from the point where the patient arrives for admission until they are physically located in a bed or a chair, and electronically admitted on the Millennium Bed Board.

3. Definitions

Admission	A patient received into a service unit for a specific procedure or treatment.
Bed Board	A real-time interactive electronic display in PM Office of admissions to a ward or other admissions unit.
Cerner	The company that designs, provides, and supports the Millennium software.
Conversation	An interaction carried out by the user within PM Office whereby the user is required to input a series of data items into one or more fields.
Day Case	A patient admitted electively during the course of a day with the intention of receiving care who does not require the use of a Hospital Bed overnight and who returns home as scheduled. If this original intention is not fulfilled and the patient stays overnight, such a patient should be counted as an ordinary inpatient admission
Elective admission	An admission where the decision to admit can be separated in time from the actual admission (by days, weeks, or months), thereby enabling the patient and the Trust to agree a mutually convenient time.
Emergency admission	An unpredictable and short-notice admission (of no more than hours from referral) where the patient's clinical need is of great urgency.
Inpatient	A patient who is admitted either electively or non-electively with the expectation that they will remain in hospital for at least one night, including a patient admitted with this intention who leaves hospital for any reason without staying overnight.
Millennium	A suite of software applications used by Barts Health as the core of its patient administration system.
TCI Date	A patient's date To Come In for admission agreed by both the patient and the Trust.
Waiting List	A list of patients waiting for admission into the Trust for specific treatment.
Worklist	A real-time interactive electronic list in PM Office from which administrative actions can be undertaken (e.g. admit a TCI patient onto a ward).

4. Responsibilities

4.1.1. The roles responsible for carrying out this process on a **regular basis** are ward clerks, ward receptionists, ward administrators, senior ward administrators, health care assistants and nurses.

4.1.2. The roles responsible for carrying out this process on an **ad hoc** basis are clinicians, service development assistants, patient pathway coordinators, patient care coordinators, admissions team members, service managers, medical secretaries and POD team leaders

4.1.3. The operational areas required to follow this process include all wards and admissions areas managing the care of elective patients

4.1.4. The following areas are excluded from this process are all non-elective services within the Trust.

5. Procedure / Process

5.1. Timeframes

A patient has arrived at the designated ward and needs to be admitted onto the ward or unit.

> **Within 30 minutes** of arrival the patient must be admitted physically into a bed or chair, and also electronically onto the **PM Office Bed Board** in Millennium. If that is not possible owing to delays beyond the control of the admitting staff members, the patient must be admitted **within a maximum of 60 minutes** of their arrival.
>
> For reasons of patient safety, efficiency of care, and planning and reporting requirements, the Trust aims to maintain **real time recording** of patient activity throughout the patient pathway. Accordingly staff members must try to record patient activity in **real time** i.e. immediately as the activity occurs in all instances of patient care.
>
> If any patient is progressed physically to theatres and checked into theatres in Millennium, before their waiting list encounter has been admitted in Millennium, staff will be prevented thereafter from admitting the patient to the PM Office Bed Board. By admitting in **real time**, this problem is avoided as the correct sequence of actions is then guaranteed.

In this way, the patient must appear on the **PM Office Bed Board** in line with the above targets, in addition to being physically admitted to a bed or chair accordingly.

In any instance where real time recording has not occurred, **retrospective recording** of information must be carried out such that back-dating and back-timing to the actual date and time of patient activity is ensured. So in the event that a patient is admitted 30 minutes later than their arrival time, the actual arrival date and time (i.e. 30 minutes earlier than the inputting time) must be entered into the relevant fields in **PM Office**.

5.2. Preparation

For booked elective patients, ward staff must ensure that each patient's paper case notes are available and correctly prepared in advance of each admission. Preparing the notes may include locating, requesting, and collecting the notes from their current location elsewhere. If, after reasonable efforts, the notes are not available, temporary case notes must be created and prepared for use.

Ward staff must check their ward's TCI Worklists at least 24 hours in advance of each admission to ensure all patients appearing on their ward's daily theatre list (available to print via **SurgiNet Report Builder**) appear correctly on the corresponding **TCI Worklist by Ward**.
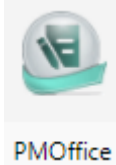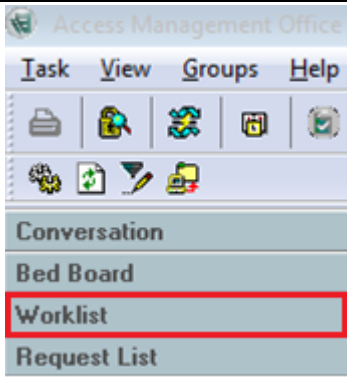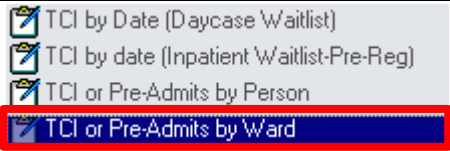
For TCI entries presenting the incorrect **TCI Date** or **TCI Location**, patients can still be admitted upon arrival provided that the correct admission date, time, and location are entered into the **Inpatient Elective Admission** conversation during admission.

For support with the following instances, contact the relevant admissions scheduling team in the first instance. For next level support, contact the Data Quality team via the ICT Service Desk:

5.2.1. TCI entries missing from the TCI Worklist by Ward
5.2.2. TCI entries linked to an incorrect encounter
5.2.3. TCI entries that have been incorrectly admitted and discharged
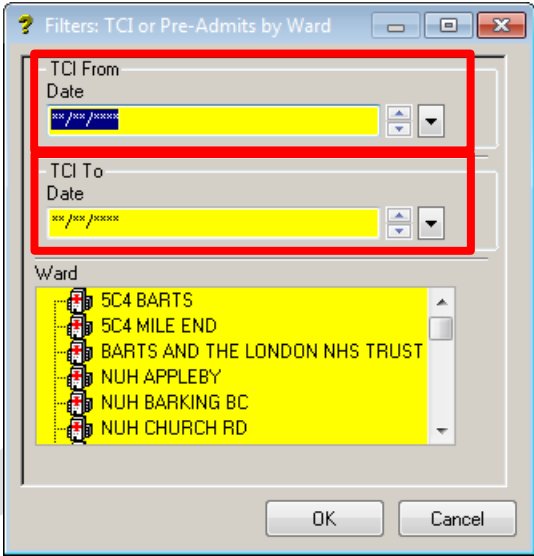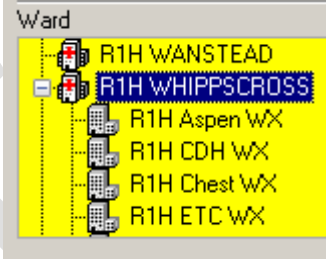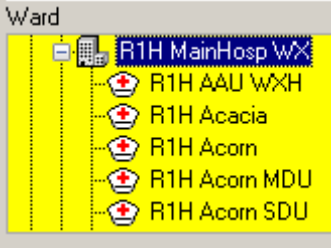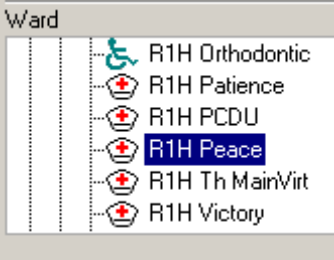
Note: the DQ Team is able to assist once a job reference number has been issued by the Service Desk.

Admitting an elective patient to the ward.
Find a patient on the TCI Worklist by Ward
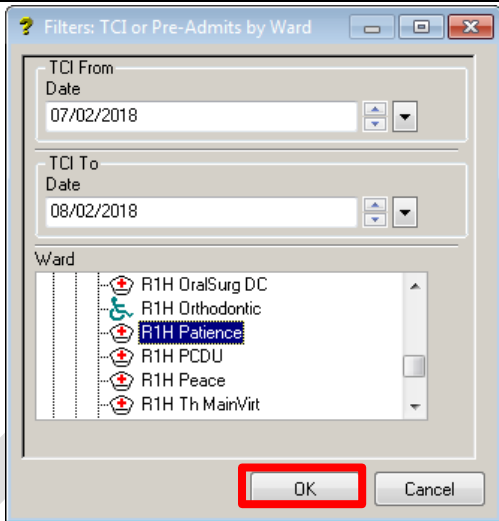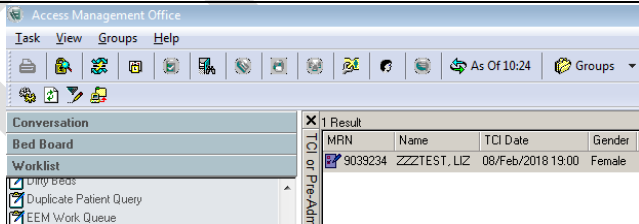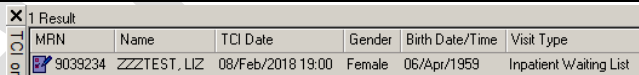
	Activity	Additional Guidance
1.	To access **Millennium** refer to **GEN01 Logging into Millennium**.	
2.	Click on the **PMOffice** icon to launch the application.	
3.	**Access Management Office (PM Office)** opens. Click the **Worklist** tab, if the contents of this workgroup are not already on display. *Note: PM Office is also known as Access Management Office.*	
4.	The expanded workgroup will list the available worklists in alphabetical order. Scroll down to display lists beginning with **TCI**. To find the patient by specific location details, double click **TCI or Pre-Admits by Ward**.	
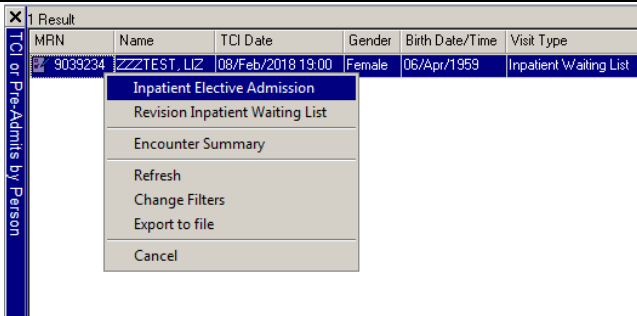
	Activity	Additional Guidance
5.	The **Filters: TCI or Pre-Admits by Ward** window opens. Click in the **TCI From Date** field and type the date in the format dd/mm/yyyy e.g. yesterday's date 08/02/2018 Click in the **TCI To Date** field and type the date in the format dd/mm/yyyy e.g. today's date 09/02/2018**.** *Note: To enter today's date quickly press 'T' on the keyboard. To enter yesterday's date quickly press '–' on the keyboard.*	
6.	From the list of facilities (sites), click the facility where the patient's procedure is due to be carried out e.g. R1H WHIPPSCROSS to reveal a selection of buildings on that site.	
7.	From the list of buildings that appears, click on the intended building e.g. R1H MainHosp WX to reveal a selection of wards and admissions areas. *Note: All wards and admissions areas are represented by the nurse's hat icon.*	
8.	From the various wards that appear scroll down to display and click on the intended TCI ward e.g. R1H Peace.	

	Activity	Additional Guidance
9.	Once all of the fields have been completed in the window, click the **OK** button.	
10.	The resulting list of patients will appear on the right of the **Worklist** group.	
11.	Locate the correct patient on the TCI Worklist by checking and confirming the following details with the patient directly: • Name • Date of Birth • Gender • MRN (if possible) *Note:* To sort the list alphabetically in ascending order (a-z), click on the name column heading. Click again to sort the list alphabetically in descending order (z-a). Any of the columns can be used to sort the list in either direction.	

Right every time
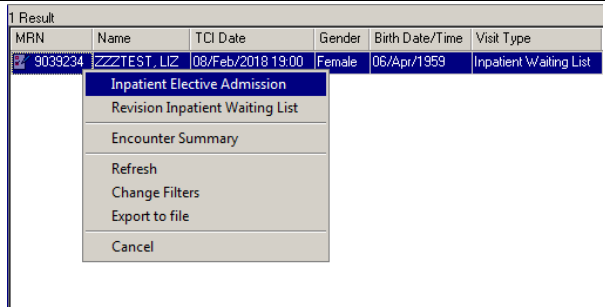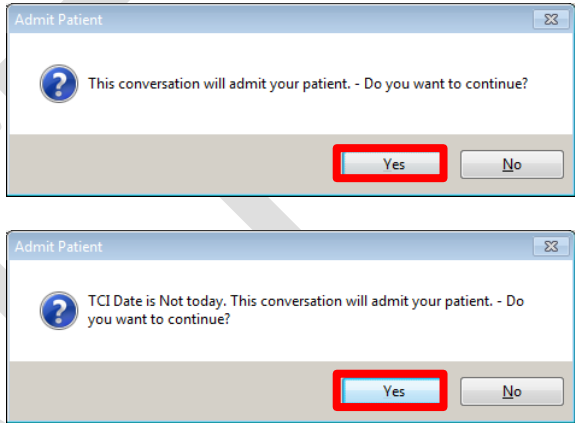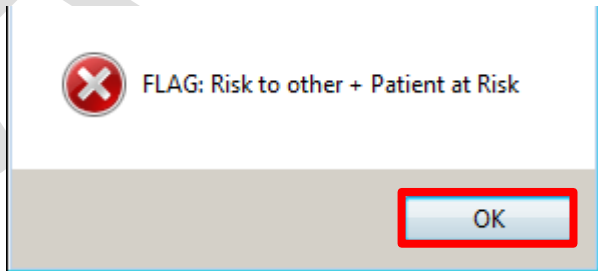
Activity	Additional Guidance
12. If the patient is not listed, run the TCI Worklist by Ward again and check that the correct ward or unit has been selected, and also extend the search period to a week or more into the past and into the future. *Note:* to search from the beginning of the year, press 'Y' on the keyboard in the TCI From Date field. If the patient is still not found on the worklist refer to Appendix 1 – Find a patient on the TCI Worklist by Person on page 22. If the patient is still not found, contact the relevant admissions scheduling team for assistance. If the correct TCI is found, proceed to section Admit an Elective (TCI) Patient from the TCI Worklist.on page 10.	
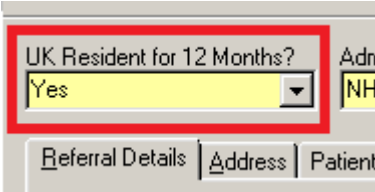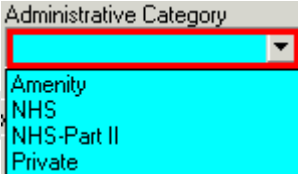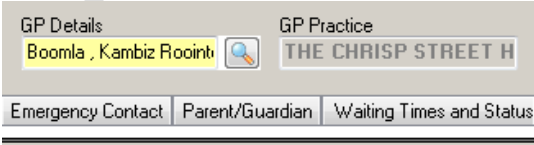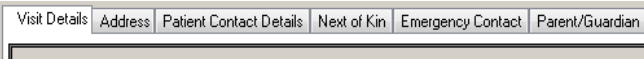
Admit an Elective (TCI) Patient from the TCI Worklist

	Activity	Additional Guidance
1.	Right click the correct patient on the **TCI Worklist** and select **Inpatient Elective Admission**.	
2.	The **Admit Patient** dialogue window will appear. Click **Yes** to confirm that the patient is to be admitted now. *Note: If the **Admit Patient** dialogue window appears stating that the admit date is not today, check before proceeding that the correct patient is being admitted. Click **Yes** to continue.*	
3.	For patient records with active alerts recorded, the **Inpatient Elective Admission** conversation will present an alert pop-up window. For **Patient at Risk** or **Risk to other** alerts, ensure the clinical staff on the ward are informed as the safeguarding team may need to be contacted. Phone: 07567 413 609 or 07753 309 888 Click **OK**.	
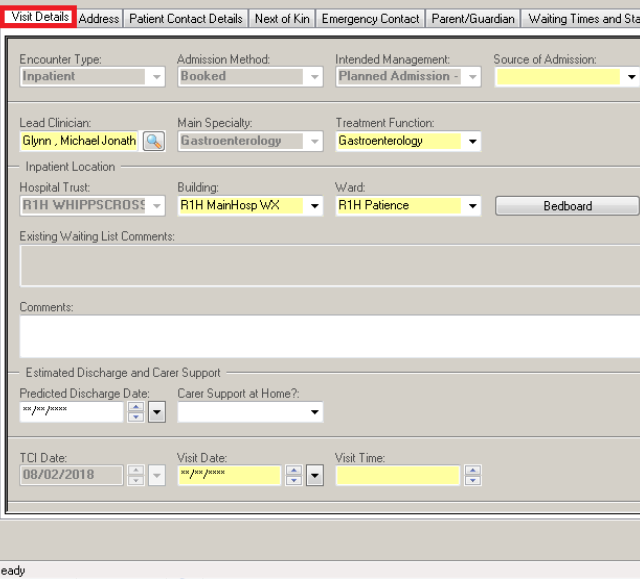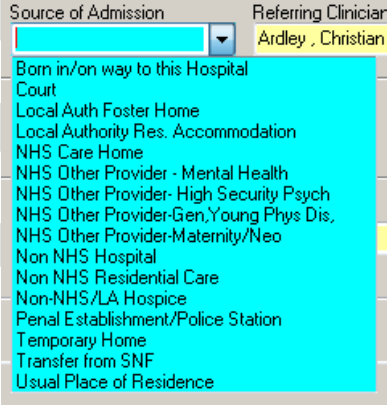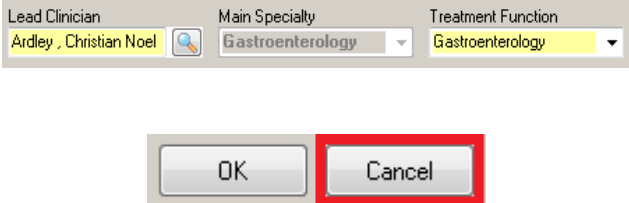
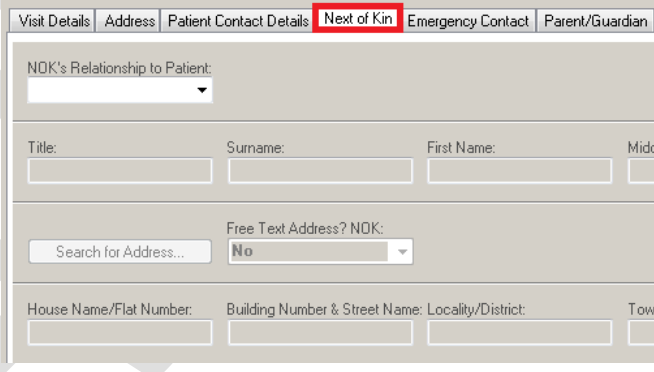|	**Activity**	**Additional Guidance**
4.	The **Inpatient Elective Admission** conversation window presents for completion. Demographic information from the patient's previous contacts with the NHS is pre-populated in various fields. All empty yellow fields are mandatory and must be completed across all tabs. White fields are optional but do require completion where advised in this SOP. **Surname** – This information will pull through from the Personal Demographic Service (PDS) screen if the patient was found. To manually add or amend a patient's surname, click in the field and update.	Surname JONES
5.	**First Name** – This information will pull through from the Personal Demographic Service (PDS) screen if the patient was found. To manually add or amend a patient's first name, click in the field and update.	First Name JENNIFER
6.	**Gender** – This information will pull through from the Personal Demographic Service (PDS) screen if the patient was found. To select the patient's **Gender**, click on the drop down menu and select. **Not Known** means that the information is not available. By selecting **Not Known,** the system will prompt the user to enter the details at the next patient contact. **Unspecified** means that the patient's gender is medically indeterminate and unable to be specified.	Gender Female Male Not Known Unspecified

Right every time
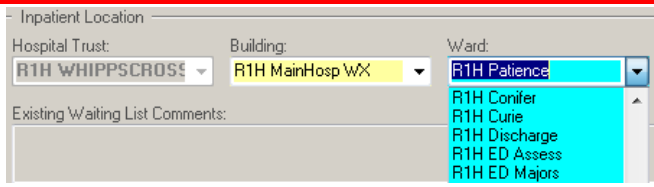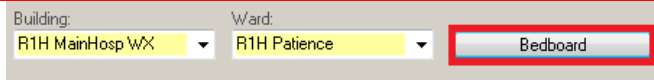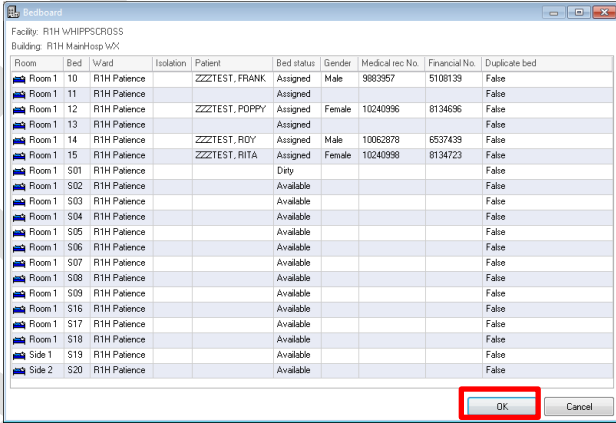
	Activity	Additional Guidance
7.	This field is very important to ensure the Trust receives the correct funding for the patient's attendance. Select **Yes** in the **UK Resident for 12 Months** field, unless the patient has not been a UK resident for 12 months, in which case select **No** then you must enter the patients temporary address, see page 30 for guidance. Then contact the Overseas team to inform them on: Whipps Cross Hospital Bleep 549 Tel: 020 8539 5522 ext 4536/5014/6802 Newham General Tel: 020 7055 5717 St Barts/Mile End/London Chest/Royal London Hospital Tel: 020 3465 6055 /020 3465 5030	
8.	**Administrative Category –** will pre-populate with **NHS.**	
9.	Check with the patient that their GP details are correct in the top pane of the window. If incorrect, advise the patient or relative to contact their GP directly. *Note: Only GP practices can update GP registration details for their patients via the NHS Spine.*	
10.	Each of the following tabs needs careful individual attention in turn for possible completion, as described in further steps in this SOP: • Visit Details • Address • Patient Contact Details • Next of Kin • Emergency Contact • Parent/Guardian	

	Activity	Additional Guidance
11.	Click on the **Visit Details** tab if its contents are not already on display in the bottom pane. This tab provides a way to input where the patient arrived from, where they are to be admitted, and the date and time of admission.	
12.	Click the drop down menu for the **Source of Admission** field. If a patient is coming directly from home, select **Usual Place of Residence**. For further guidance on the different options, refer to Appendix 2 – Source of Admission Options on page 24. *Note: To select quickly, type the first letter of the required option listed e.g. to select **Usual Place of Residence**, press 'U' on the keyboard.*	
13.	The **Lead Clinician**, **Main Specialty** and **Treatment Function** fields will be filled in already from when the patient was added to TCI list. If this information is incorrect, contact the relevant admissions scheduling team to amend the patient's TCI. Click the **Cancel** button in the bottom right corner of the window. If the information is correct proceed to the next step.	

	Activity	**Additional Guidance**
14.	If not already correct, click on the **Building** drop down field and select the correct building. Click on the **Ward** drop down field to select the ward or admissions unit where the patient is being admitted. The options available will be determined by the answer in the **Building** field.	
15.	Click the **Bedboard** button to allocate the patient a bed.	
16.	Select a bed or chair from the list, as decided by the nurse or doctor in charge. Beds or chairs with a **Bed status** of **Available** can be used. Click the **OK** button in the bottom right corner of the window**.**	

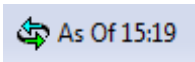|	Activity	Additional Guidance
17.	**Visit Date** and **Visit Time** present as empty yellow fields, which are therefore mandatory to complete. **Within 30 minutes** of arrival the patient must be admitted physically into a bed or chair, and also electronically onto the **PM Office Bed Board** within Millennium. If that is not possible owing to delays beyond the control of the admitting staff members, the patient must be admitted **within a maximum of 60 minutes** of their arrival. The Trust must maintain **real time recording** of patient activity throughout the patient pathway. From the **Visit Date** drop down calendar select the actual date of the patient's admission, with particular attention if the patient actually admitted on any previous day. Without using any separators (like dots or colons), type the patient's admission time as four digits in the **Visit Time** field to reflect the actual time of admission. *Note: Shortcut keys on the keyboard are '**T**' for today's date and '**N**' for current time (i.e. now).*	**ALERT!** **PATIENTS MUST BE ADMIITTED IN REAL TIME WITHIN A MAXIMUN OF 60 MINUTES OF ARRIVAL ON THE WARD OR UNIT!**
18.	If the patient is a child and has a social worker, enter the name and number of the social worker in the **Comments** field	
19.	Click on the **Address** tab and refer to Appendix 3 – Update Patient Address Details on page 25 to update the patient's address.	

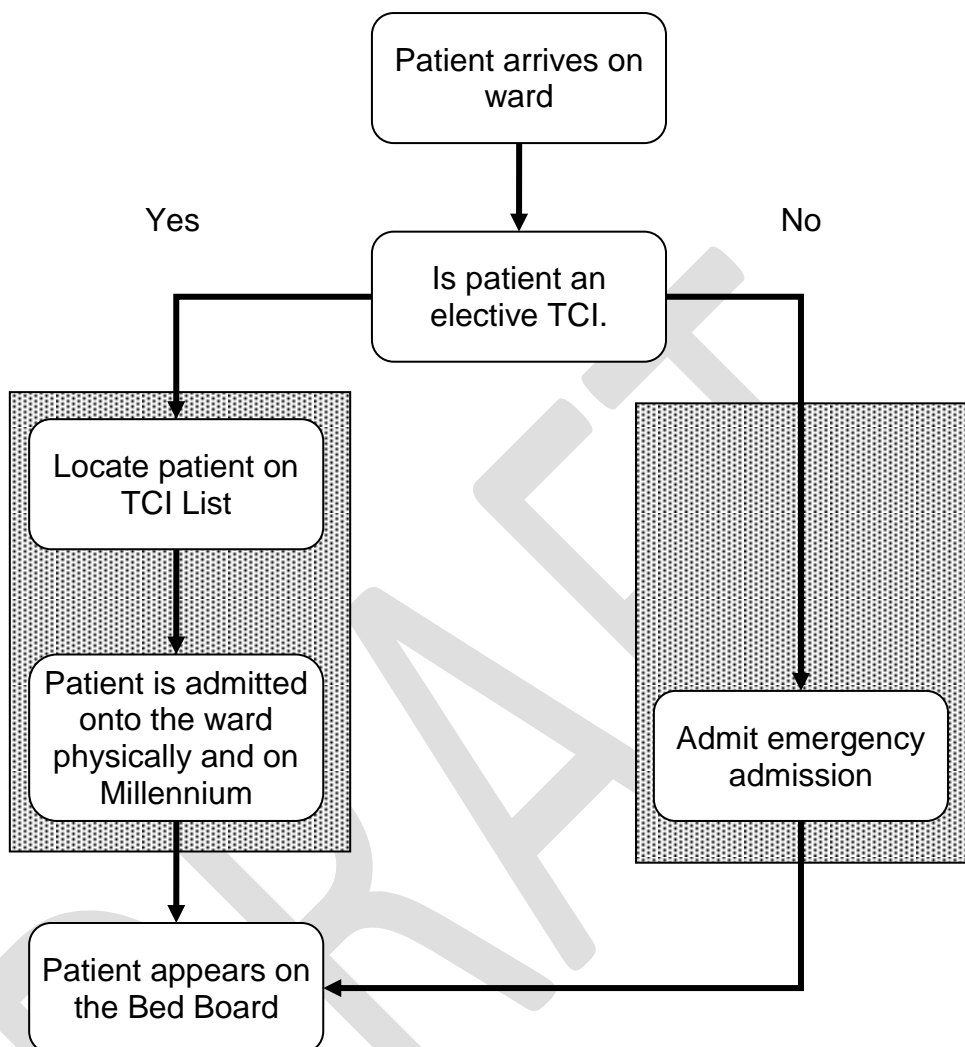|	**Activity**	**Additional Guidance**
20.	Click on the **Patient Contact Details** tab and refer to Appendix 4 – Update Patient Contact Details on page **Error! Bookmark not defined.** to update the patient's telephone details.	
21.	Click on the **Next of Kin** tab and refer to Appendix 5 – Update Next of Kin Details on page 39 to update the patient's Next of Kin details.	
22.	If the patient is **under 16**, their **Parent/Guardian** and **School** must be recorded. Click on the **Parent/Guardian tab** and refer to Appendix 6 – Update Parent Guardian Details on page 41 for further details, which includes guidance on completing school details. If the patient is an adult or the details have been recorded, proceed to the next step.	

	Activity	Additional Guidance
23.	All of the mandatory fields are now complete, so the patient can be admitted. In the bottom right hand corner, click on **OK**.	
24.	Open the Bed Board pane for the relevant ward by clicking on the **Bed Board** workgroup and double-clicking on the name of the ward where the patient is admitted. The patient is now admitted on the PM Office Bed Board and has disappeared from the TCI Worklist and appeared on the Bed Board for the relevant ward or unit.	

	Activity	Additional Guidance
25.	If the patient does not display as expected, click the **As Of** button on the toolbar to refresh both open panes. If the patient still does not display as expected, contact the relevant admissions scheduling team, or contact the Data Quality team via the ICT Service Desk (the DQ Team is able to assist once a job reference number has been issued by the Service Desk).	⇆ As Of 15:19
26.	If wrist bands or front sheets are need to be printed refer to **Appendix 7 – Printing Documents on admission** page 45	

6. Flow Diagram

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                          ┌──────────────────┐
                          │ Patient arrives on│
                          │      ward         │
                          └──────────────────┘
                                   │
           Yes                     ▼                     No
                          ┌──────────────────┐
            ┌─────────────│  Is patient an   │─────────────┐
            │             │   elective TCI.  │             │
            ▼             └──────────────────┘             │
   ┌──────────────────┐                                    │
   │ Locate patient on│                                    │
   │     TCI List     │                                    │
   └──────────────────┘                                    ▼
            │                                     ┌──────────────────┐
            ▼                                     │ Admit emergency  │
   ┌──────────────────┐                           │   admission      │
   │ Patient is admitted│                         └──────────────────┘
   │ onto the ward      │                                  │
   │ physically and on  │                                  │
   │   Millennium       │                                  │
   └──────────────────┘                                    │
            │                                              │
            ▼                                              │
   ┌──────────────────┐                                    │
   │ Patient appears on│◄──────────────────────────────────┘
   │  the Bed Board    │
   └──────────────────┘
```

7. References

7.1. For guidance on how to **Admit an Emergency Inpatient or Day Case Patient** refer to the following Informatics WorkAids (Inpatients) located on **Barts Health Fileshare (BHF):**

IP11 – Create Pending Admission Encounter for Patients without TCI / Waiting List Entry

IP12 – Admit Patient with Pending Inpatient Admission without TCI / Waiting List Entry

7.2. For guidance on how to **Manage Regular Admissions** refer to the following Informatics WorkAids (Inpatients) located on **Barts Health Fileshare (BHF):**

IP16 – Regular Day Admission

8. Monitoring and Audit
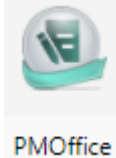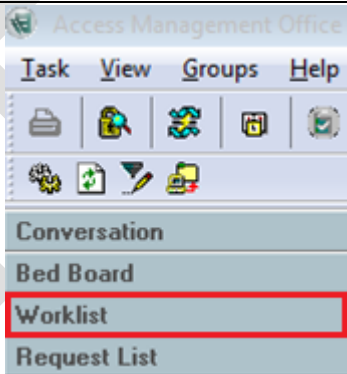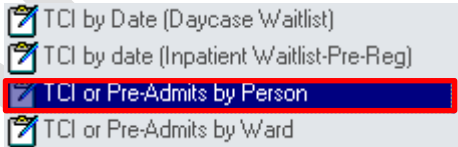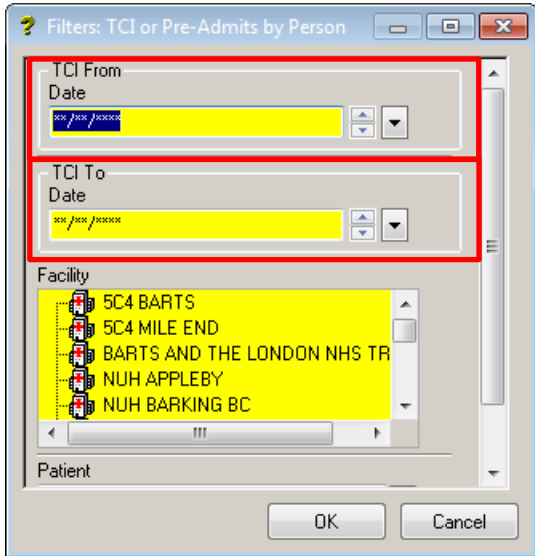
Issue being monitored	Monitoring method	Responsibility	Frequency	Reviewed by and actions arising followed up by
Trust is not admitting in a timely fashion leading to patients being checked into theatres for surgery before admission to a ward thereby preventing admission encounters from being actioned on the PM Office Bed Board.	KPI	AS per reinforcement report	Weekly	Individual staff member
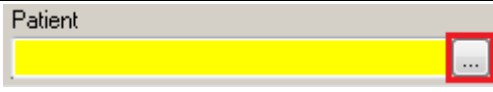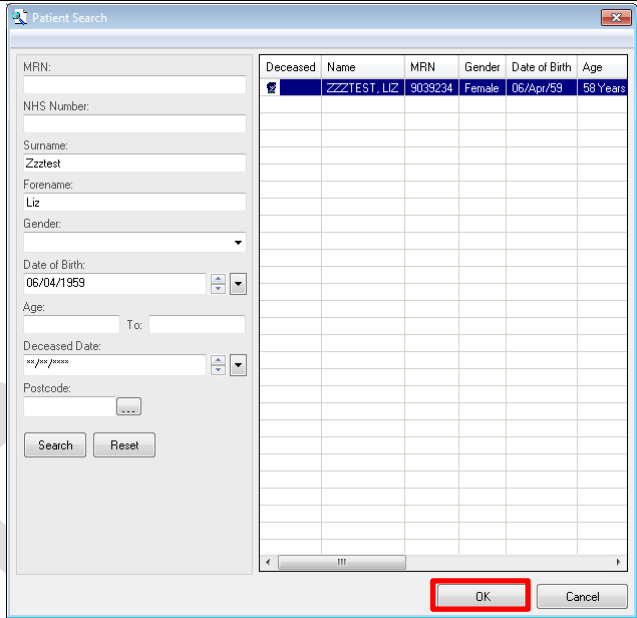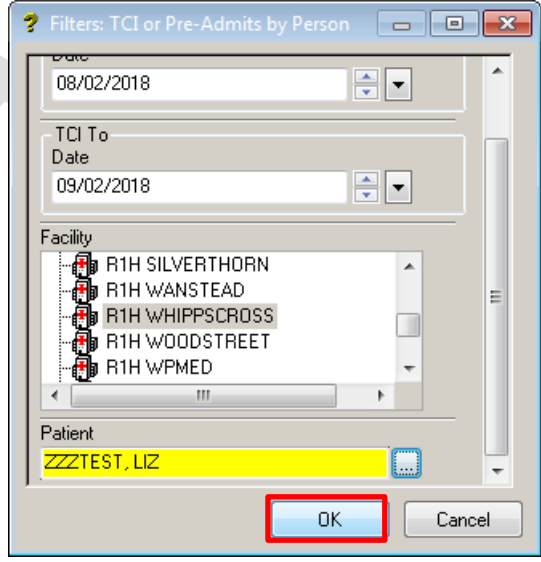
9. Appendices

9.1. **Appendix 1 – Find a patient on the TCI Worklist by Person**

	Activity	Additional Guidance
1.	To access **Millennium** refer to **GEN01 Logging into Millennium**.	
2.	Click on the **PMOffice** icon to launch the application.	PMOffice
3.	**Access Management Office (PM Office)** opens. Click the **Worklist** tab, if this workgroup is not already fully expanded. *Note: PM Office is also known as Access Management Office.*	Access Management Office Task View Groups Help Conversation Bed Board Worklist Request List
4.	To find the patient by entering patient details, double click **TCI or Pre-Admits by Person**.	TCI by Date (Daycase Waitlist) TCI by date (Inpatient Waitlist-Pre-Reg) TCI or Pre-Admits by Person TCI or Pre-Admits by Ward
5.	The **Filters** window opens. Click in the **TCI From Date** field and type the date in the format dd/mm/yyyy e.g. yesterday's date 08/02/2018 Click in the **TCI To Date** field and type the date in the format dd/mm/yyyy **e.g**. today's date 09/02/2018**.** *Note: To type today's date quickly press '**T**' on the keyboard. Further, to type yesterday's date quickly press '**–**' on the keyboard.*	Filters: TCI or Pre-Admits by Person TCI From Date TCI To Date Facility 5C4 BARTS 5C4 MILE END BARTS AND THE LONDON NHS TR NUH APPLEBY NUH BARKING BC Patient OK Cancel
6.	From the list of facilities (sites), click the facility where the patient's procedure is to be carried out e.g. R1H WHIPPSCROSS.	Facility R1H SILVERTHORN R1H WANSTEAD R1H WHIPPSCROSS R1H WOODSTREET

	Activity	**Additional Guidance**
7.	Scroll down to display the **Patient** field and click the ellipsis button.	Patient
8.	In the **Patient Search** window enter the patient's **MRN** and then click the **Search** button. Alternatively, enter the patient's **Surname**, **Forename**, and **Date of Birth** instead, and then click the **Search** button. Select the correct patient from the resulting list and click the **OK** button.	
9.	In the **Filters: TCI or Pre-Admits by Person** window, once all fields have been completed, click the **OK** button. To admit the patient from the resulting list, continue from 7. Admit an Elective (TCI) Patient from the TCI Worklist on page 10. If the patient is not found run this worklist again ensuring that a wider date range is used (e.g. from the beginning of the year), that the correct ward and patient have been selected. If the patient cannot be found, contact the relevant admissions scheduling team.	
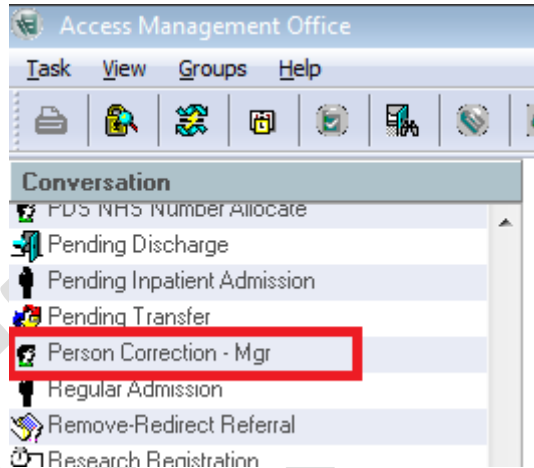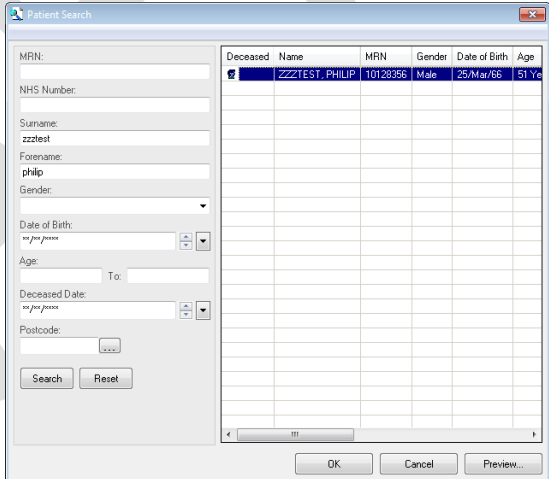
9.2. **Appendix 2 – Source of Admission Options**

	Option	Description
1.	Born in/on way to this hospital	For admissions of a new-born baby.
2.	Court	For admissions from Court.
3.	Local Auth Foster Home	For admissions from Local Authority Foster Homes.
4.	Local Authority Res. Accommodation	For admissions from Care Homes (for example where care is provided). If care is not being provided and this is their usual place of residence, then use Usual Place of Residence.
5.	NHS Care Home	For admissions from NHS Care Homes. If care is not being provided and this is their usual place of residence, then use Usual Place of Residence.
6.	NHS Other Provider – Mental Health	For admissions from Wards where the patient has been for mental health or learning disabilities.
7.	NHS Other Provider – High Security Psych	For admissions from High Security Psychiatric (NHS) Care Homes/Wards.
8.	NHS Other Provider – Gen, Young Phys Dis	For admissions from other NHS providers for general patients or the younger physically disabled or ED (do not use for the ED), use the most relevant for the patient before they attended A & E).
9.	NHS Other Provider – Maternity/Neo	For admissions from NHS Maternity/Neonatal sources.
10.	Non NHS Hospital	For admissions from Non NHS Hospitals.
11.	Non-NHS Residential Care	For admissions from Non NHS Care Homes (not including Local Authority). If care is not being provided and this is their usual place of residence, then use Usual Place of Residence.
12.	Non-NHS/LA Hospice	For admissions from non-NHS/Local Authority Hospices.
13.	Penal Establishment/Police station	For admissions from Penal (Prisons)/Police Stations or Court.
14.	Temporary Home	For admissions from places of residence that are not the patient's permanent place of residence (for example hotels and students living at a term time address).
15.	Transfer from SNF	For admissions from Skilled Nursing Facilities that provide, for example, dementia care.
16.	Usual Place of Residence	For admissions from a private dwelling whether owner occupied or owned by Local Authority, housing association or other landlord. This includes wardened accommodation but not residential accommodation where health care is provided. It also includes patients with no fixed abode.
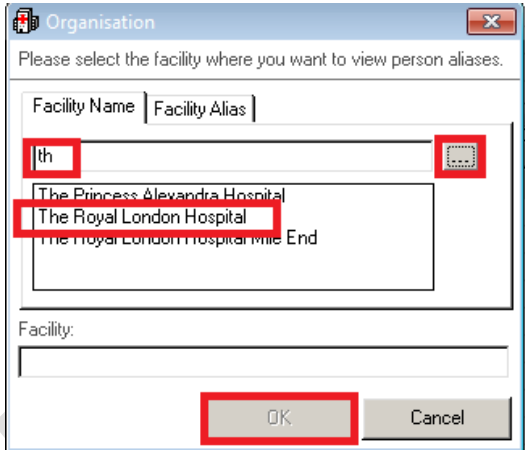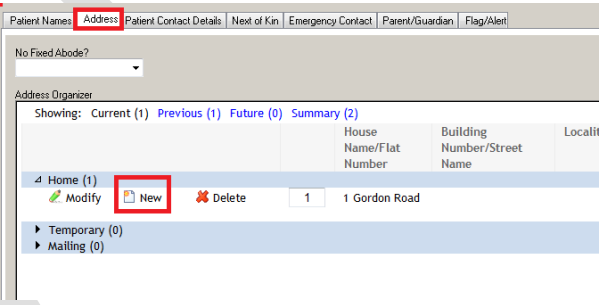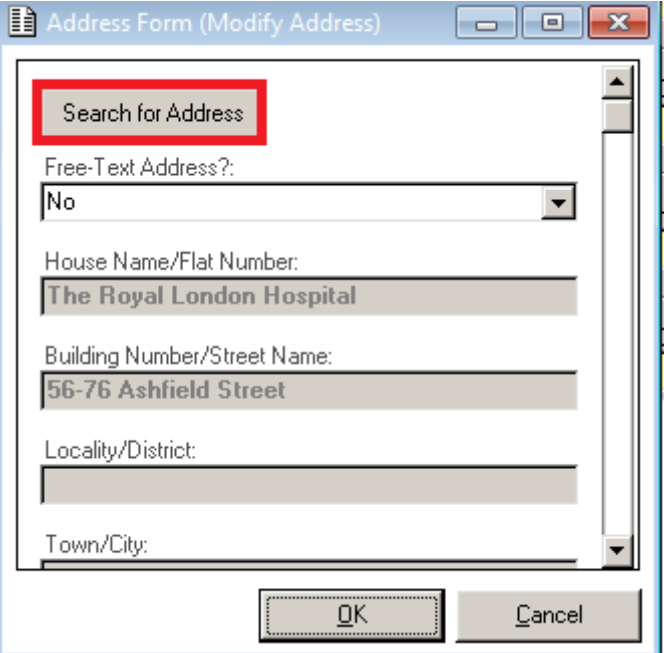
9.3. **Appendix 3 – Update Patient Address Details**

i. Update Home Address (Usual Place of Residence)
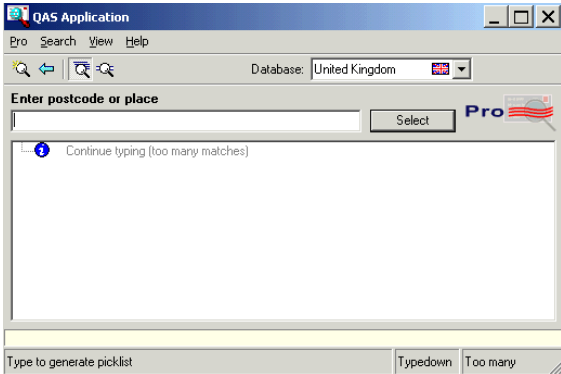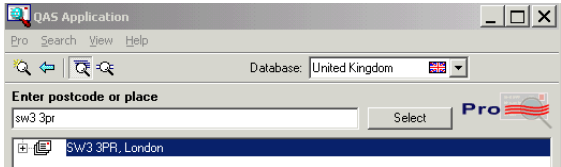
	Activity	Additional Guidance
1.	Double click the **Person Correction – Mgr** conversation.	
2.	Enter **MRN** and click **Search.** Select the correct patient and click **OK** *NOTE: If more than one patient is displayed, ensure you select the correct patient by checking the DOB.*	
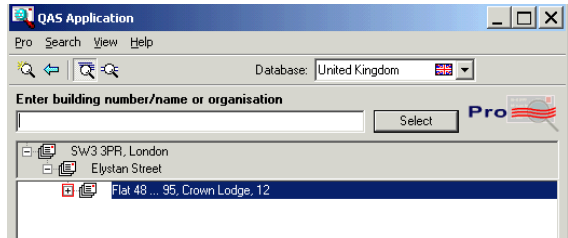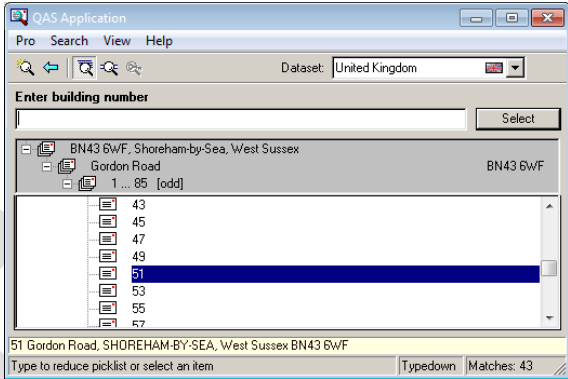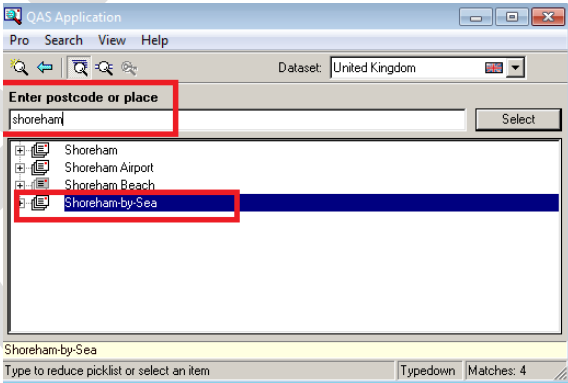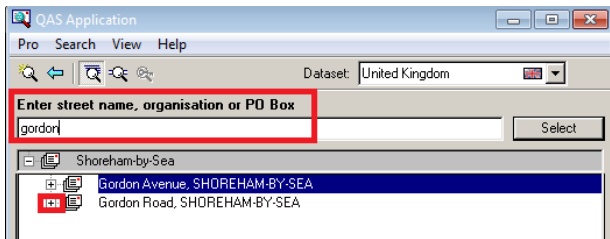
		Activity	Additional Guidance
3.		The **Organisation** window opens. Enter the location the patient is to have their first appointment. Either:- • The Royal London Hospital. • The Royal London Hospital Mile End • St Bartholomew's Hospital • Whipps Cross University Hospital • Newham University Hospital NUH Type the first few letters of the location in the **Facility Name** field. Click the ellipsis ⬚ button. Select location Click **OK.**	
4.		Select the **Address** tab. Click **New.** *NOTE: never delete addresses*	
5.		Click the **Search for Address** button.	
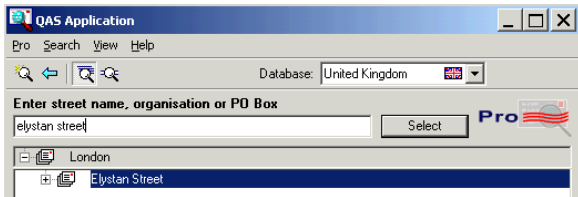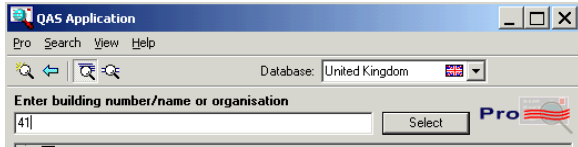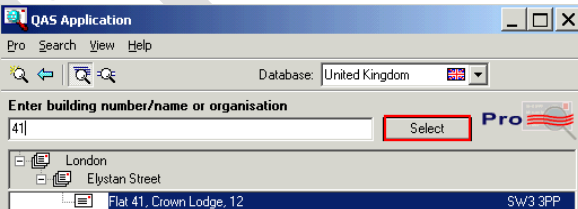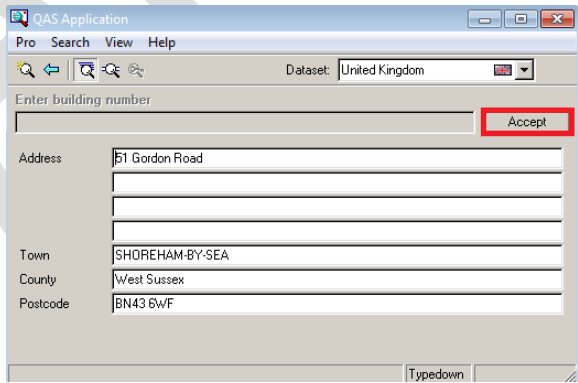
		Activity	**Additional Guidance**

| 6. | The **QAS Application** window opens.

 Enter the patient's postcode or town/city in the Enter **postcode or place** field.

 If a postcode has been entered proceed to **step 7.**

 If a place has been entered proceed to **step 9.**

 If entering an overseas address as the usual place of residence, refer to **Appendix 3 – Entering Patient Address Details iv) Free text on page** Error! Bookmark not defined.**.** |

Enter postcode or place

sw3 3pr

Enter postcode or place

London

| 7. | The postcode and city/town are displayed.

 Click on the ⊞ button to show the street which is associated to that postcode.

 If the postcode has not been found, the address can be entered manually; proceed to **Appendix 3 – Entering Patient Address Details iv) Free text** on **page** Error! Bookmark not defined.. |
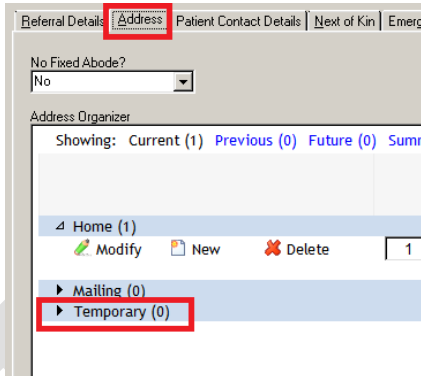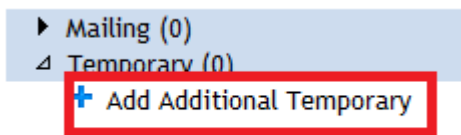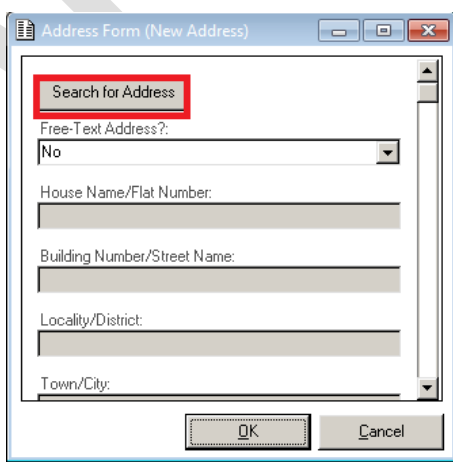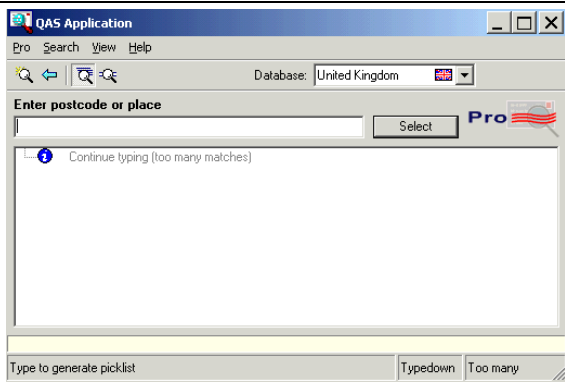
		Activity	Additional Guidance
8.		Click on the ⊞ button to show all house numbers/names available for that postcode. Select **house number/name or organisation**. Click **Select** button. Proceed to **step 13.**	
9.		The city/town is displayed. Click on the ⊞ button to proceed to the next search screen.	
10.		Enter the street name in the **Enter street name, organisation or PO Box** field.	

	Activity	Additional Guidance
11.	Click on the ⊞ button to show all house numbers/names available for that street. Enter the house number or name in the **Enter building number/name or organisation** field.	
12.	Select **house number/name or organisation**. Click the **Select** button.	
13.	The address details appear. Confirm the details. The details can be edited on this screen if needed e.g. if the house also has a name it can be entered in the **Address** field. Once the address is correct, click the **Accept** button.	
14.	The patient's address has been added. If the home address of a prisoner has been recorded as their usual place of residence, a correspondence address must be added. The correspondence address must be the address of the prison. No documentation should be sent to the prisoner's home address. To add a correspondence address refer to **Appendix 3 – v) Entering a Correspondence Address** on **page** Error! Bookmark not defined.**.**	

ii.   Add a Temporary Address
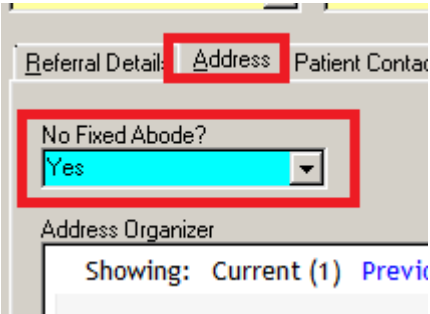
	Activity	Additional Guidance
1.	Select the **Address** tab. Click **Temporary.**	
2.	Select **Add Additional Temporary.**	
3.	The **Temporary Address Information** fields appear. Click the **Search for Address** button.	
4.	The **QAS Application** window opens. Search for address using post code or place name. See above for guidance (page 26)	

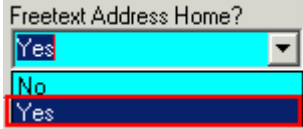|		Activity	Additional Guidance
5.		Enter the date the patient started residing at the temporary address in the **Effective From** field. If this date is unknown put today's date in the **Effective From** field. Either type the date in the **Effective From** field in the format dd/mm/yyyy e.g. 17/05/2013. Or Click the ▼ arrow and select the effective from date from the calendar view.	Effective From... 17/05/2013 2013 May Mo Tu We Th Fr Sa Su 29 30 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9
6.		Enter the date the patient will be residing at the temporary address until, in the **Effective To** field. If this date is unknown enter a date in 6 months' time in the **Effective To** field e.g. if today's date is 26/09/2013 enter the effective to date as 26/03/2014. Either type the effective to date in the **Effective To** field in the format dd/mm/yyyy. Or Click the ▼ arrow and select the effective to date from the calendar view.	Effective To... 31/05/2013 2013 May Mo Tu We Th Fr Sa Su 29 30 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9
7.		The patient's address has been added.	

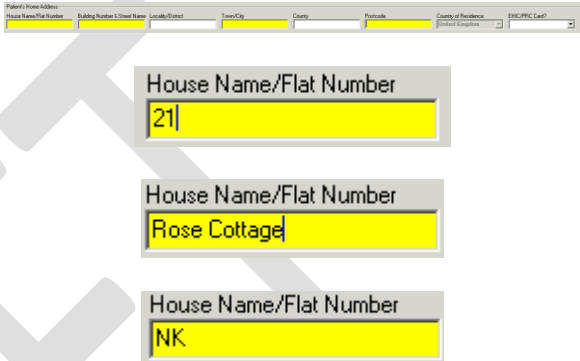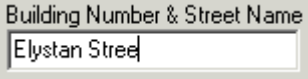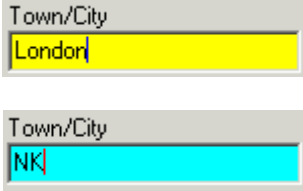iii.   Add a No Fixed Abode address

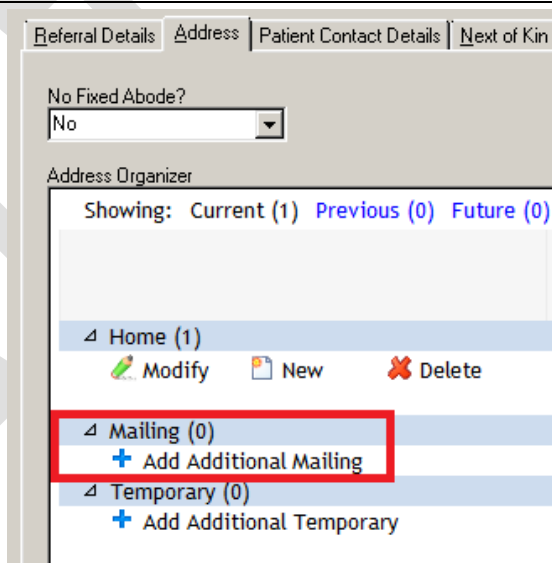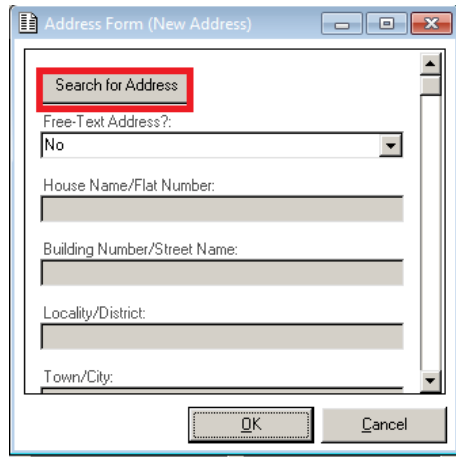|	Activity	Additional Guidance
1.	Select the **Address** tab. Select **Yes** from the **No Fixed Abode?** drop down field.	
2.	The patients no fixed abode details have been added.	

iv.   Freetext Address

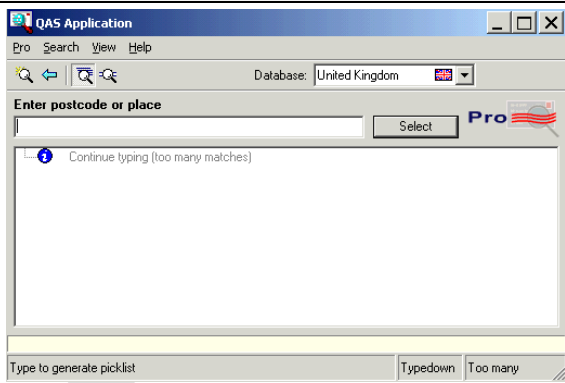|	**Activity**	**Additional Guidance**
1.	Select the **Address** tab.	
2.	Select **Yes** from the **Free text Home Address?** field.	Freetext Address Home?
3.	The **Search for Address** button will disappear and the address fields can now be typed into. Enter the patient's house/flat number or name in the **House Name/Flat Number** field. If the address is being entered for an overseas patient and the address is unknown, enter **NK** in the **House Name/Flat Number** field.	House Name/Flat Number: 21 House Name/Flat Number: Rose Cottage House Name/Flat Number: NK
4.	Enter the street name in the **Building Number & Street Name** field.	Building Number & Street Name: Elystan Stree
5.	Enter the town or city in which the patient lives, in the **Town/City** field. If the address is being entered for an overseas patient and the address is unknown, enter **NK** in the **Town/City** field.	Town/City: London Town/City: NK

		Activity	Additional Guidance
6.		Enter the patient's postcode in the **Postcode** field. f the address is being entered for an overseas patient and the address abroad is being entered the postcode must be entered as below**.**<table><tr><th>Post code</th><th>Location</th></tr><tr><td>ZZ99 3HZ</td><td>Channel Islands</td></tr><tr><td>ZZ99 4WZ</td><td>Europe</td></tr><tr><td>ZZ99 6SZ</td><td>West Indies</td></tr><tr><td>ZZ99 7AZ</td><td>United States of America</td></tr><tr><td>ZZ99 7WZ</td><td>South America</td></tr><tr><td>ZZ99 8WZ</td><td>Africa</td></tr><tr><td>ZZ99 9FZ</td><td>Middle East</td></tr><tr><td>ZZ99 9PZ</td><td>Asia</td></tr><tr><td>ZZ99 3WZ</td><td>Not known</td></tr></table>	Postcode SW3 £PR Postcode ZZ99 4LZ
7.		The patient's address has been added.	

v.   Adding a Correspondence Address

	Activity	**Additional Guidance**
1.	If the patient wants all their correspondence to go to an address other than their home address or temporary address, complete the steps below. Do not complete a correspondence address if the patient's correspondence is going to the address already recorded in the home address fields or temporary address fields. If the home address of a prisoner has been recorded as their usual place of residence, a correspondence address must be added. The correspondence address must be the address of the prison. No documentation should be sent to the prisoner's home address.	
2.	Select the **Address** tab. Select **Add Additional Mailing.**	
3.	Click **Search for Address** button.	
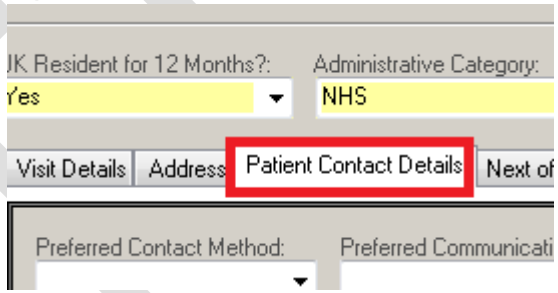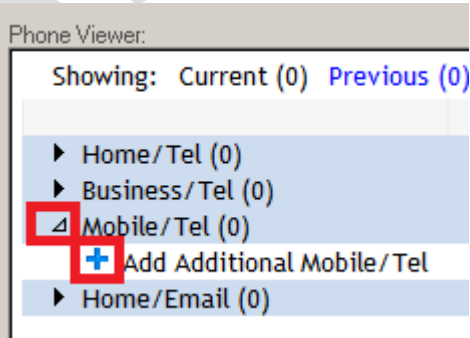
		Activity	Additional Guidance
4.		The **QAS Application** window opens. Enter postcode or place to search for address, see page 26	
5.		Enter the date the patient would like their correspondence to be delivered to another address from in the **Effective From** field. If this date is unknown, put today's date in the **Effective From** field. Either type the effective from date in the **Effective From** field in the format dd/mm/yyyy or Click the ▼ arrow and select the effective from date from the calendar view.	
6.		Enter the date the patient would like their correspondence to be delivered to another address to in the **Effective To** field. If the correspondence is always to go to this address leave the **Effective To** field blank. Either type the effective to date in the **Effective To** field in the format dd/mm/yyyy e.g. 31/05/2013 or Click the ▼ arrow and select the effective to date from the calendar view.	
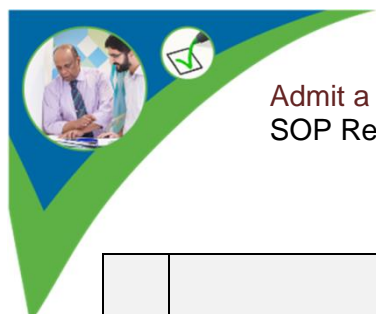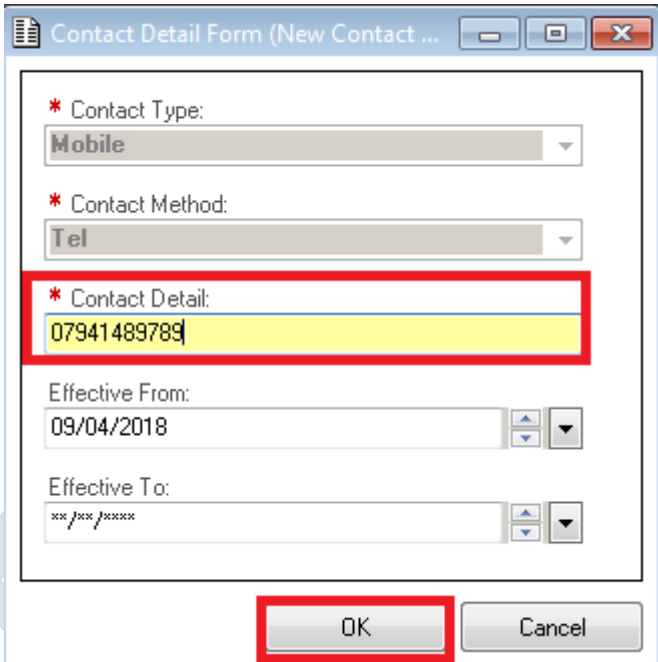
	Activity	Additional Guidance
7.	The patient's correspondence address has been added. All correspondence will now go to this address, and not the patient home address.	

9.4. **Appendix 4 – Update Patient Contact Details**

	Activity	Additional Guidance
1.	Contact details (telephone number) must be captured for all patients.	
2.	Click the **Patient Contact Details** tab.	
3.	Enter the **Home/tel** and/or **Mobile/Tel** number. Click on ◁ then ✚	

NHS
Barts Health
NHS Trust
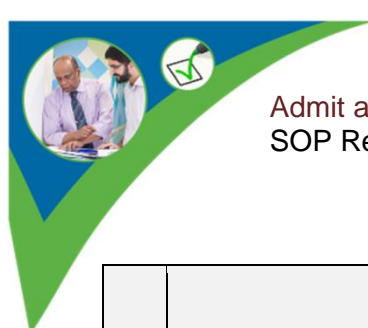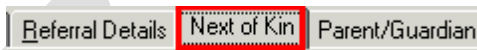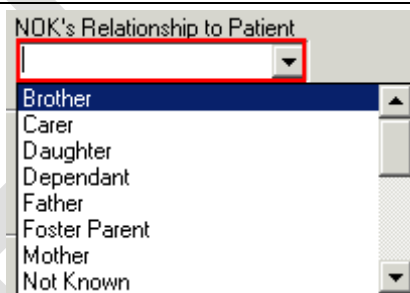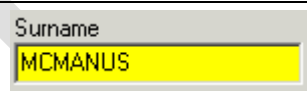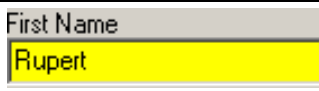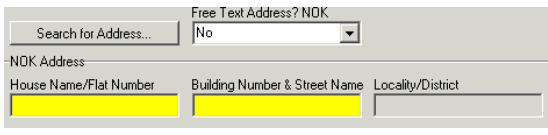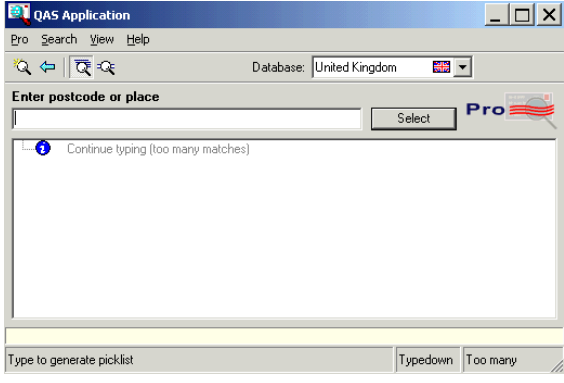
	Activity	Additional Guidance
4.	Enter the phone number in the **Contact Detail** field. Click **OK**	

9.5. **Appendix 5 – Update Next of Kin Details**

i.   Obtained

		Activity	**Additional Guidance**
5.		Next of Kin (NOK) details must be captured for all patients. If the NOK details are known, proceed to the next step. If the NOK details are unknown at this point or the patient refused to give their NOK details, this must be recorded in Millennium; refer to **ii) Next of Kin Details Cannot be Obtained** on **page 40.**	
6.		Click the **Next of Kin** tab.	Referral Details Next of Kin Parent/Guardian
7.		Select the NOK relationship to patient from the **NOK's Relationship to Patient** field e.g. Mother.	NOK's Relationship to Patient Brother Carer Daughter Dependant Father Foster Parent Mother Not Known
8.		Enter the NOK's surname in the **Surname** field.	Surname MCMANUS
9.		Enter the NOK's first name in the **First Name** field.	First Name Rupert
10.		Click on the **Search for Address** button.	Free Text Address? NOK Search for Address... No NOK Address House Name/Flat Number Building Number & Street Name Locality/District
11.		The **QAS Application** window opens. Enter postcode or place and search for address see page 26	QAS Application Pro Search View Help Database: United Kingdom Enter postcode or place Select Pro Continue typing (too many matches) Type to generate picklist Typedown Too many

	Activity	Additional Guidance
12.	If known, the NOK's contact information must now be entered. Enter the NOK's phone number. When entering a phone number, the number must contain the area code e.g. 01296456789. If the NOK has a mobile phone number, ensure the number is entered in the **Mobile Phone Number** field. If the NOK contact details are not known, leave the fields blank and proceed to the next step. This information can be captured when the patient attends clinic. **NOTE:** *Ensure contact numbers are entered correctly with no spaces.*	Home Phone Number 01296456789 Mobile Phone Number 07969671156
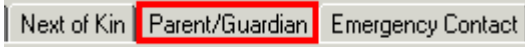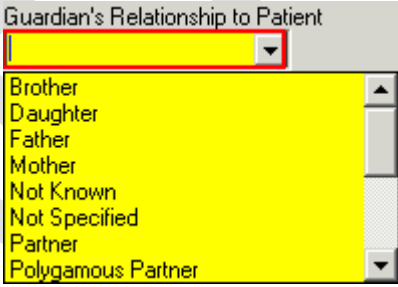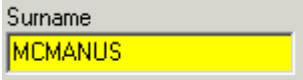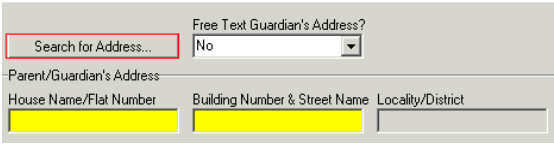
ii. Cannot be Obtained

	Activity	Additional Guidance
1.	If the Next of Kin (NOK) information is not available at this time, **unable to obtain** can be selected. The NOK information can be obtained the next time the patient presents in the Trust. If the patient or NOK refuses to give their information, this must also be recorded on Millennium.	
2.	Click the **Next of Kin** tab.	Referral Details │ Next of Kin │ Parent/Guardian
3.	Select **Unable to obtain** from the **Reason Not Obtained?** field if the NOK details are unavailable at this point. Select **Refused to provide** from the **Reason Not Obtained?** field if the patient or NOK has refused to disclose the NOK's details.	Reason Not Obtained? ▼ Refused to provide Unable to obtain
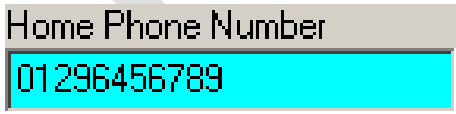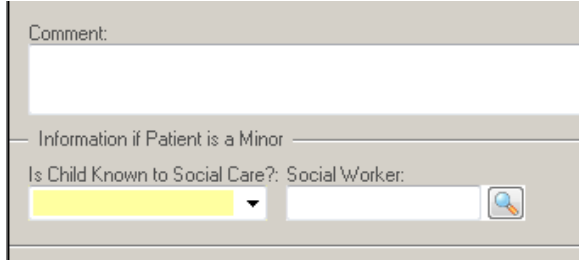
9.6. **Appendix 6 – Update Parent Guardian Details**

i.   Obtained –

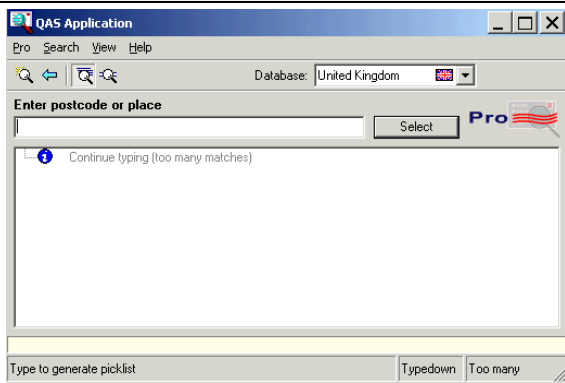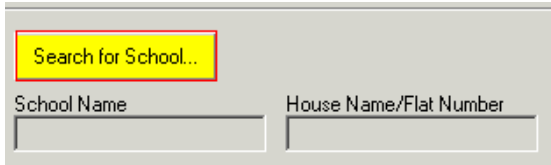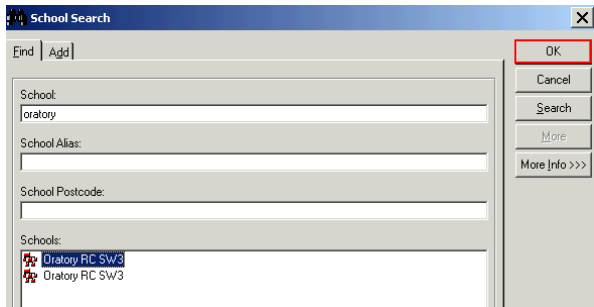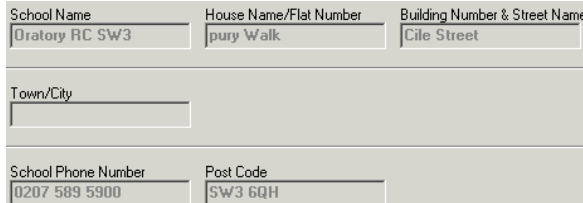|	**Activity**	**Additional Guidance**
1.	If a patient is under the age of 16, the parent guardian details become mandatory and must be completed. If the parent guardian details are known, proceed to the next step. If the parent guardian details are unknown at this point, **Unable to obtain** can be selected and this information can be captured when the patient presents at the Trust next; refer to **iii) Parent Guardian Details Cannot be Obtained** on **page 43.** All correspondence will be sent to the parent/guardian, unless a correspondence address has been added to the patient's record. If the correspondence is not to be received by the parent/guardian, enter a correspondence address; refer to **Appendix 3– Manage Patient Address Details v) Correspondence Address** on **page 35.**	
2.	Click the **Parent/Guardian** tab.	Next of Kin | Parent/Guardian | Emergency Contact
3.	Select the relationship to the patient from the **Guardian's Relationship to Patient** field e.g. Mother.	Guardian's Relationship to Patient Brother Daughter Father Mother Not Known Not Specified Partner Polygamous Partner
4.	Enter the Parent/Guardian's surname in the **Surname** field.	Surname MCMANUS
5.	Enter the Parent/Guardian first name in the **First Name** field.	First Name Rupert
6.	Click on the **Search for Address** button.	Free Text Guardian's Address? Search for Address... No Parent/Guardian's Address House Name/Flat Number Building Number & Street Name Locality/District
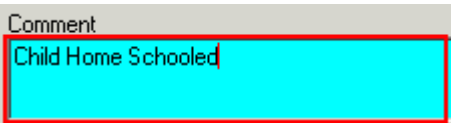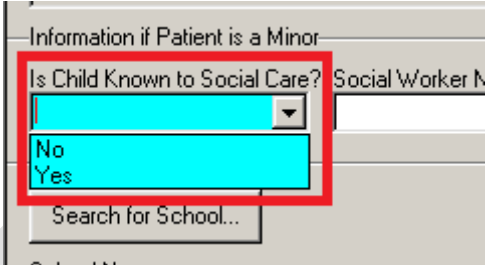
		Activity	Additional Guidance
7.		The **QAS Application** window opens. Enter postcode or place name to begin search. See page 26	
8.		If known, the parent/guardian contact information must now be entered. Enter the parent/guardian phone number. When entering a phone number, the number must contain the area code e.g. 01296456789. If the parent/guardian has a mobile phone number, ensure the number is entered in the **Mobile Phone Number** field. If the parent/guardian contact details are not known, leave the fields blank and proceed to the next step. This information can be captured when the patient attends clinic. *NOTE: Ensure contact numbers are entered correctly with no spaces.*	
9.		If the patient has a social worker, enter the name and number of the social worker in the **Comments** field. Enter **Yes** in the **Is the child Known to Social Care?** Field.	
10.		Proceed to **Appendix 6 Entering Parent Guardian Details ii) Entering School Details.**	
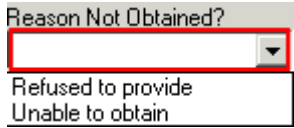
ii.   Entering School & Social Details

		Activity	Additional Guidance
1.		Click on the **Search for School** button.	Search for School... School Name House Name/Flat Number
2.		Enter the school name in the **School** field. If the school is unknown or the child is home schooled, enter **Not Listed** in the **School** field. *NOTE: If the child is home schooled, enter a comment at **step 5**.*	School: oratory School: not listed
3.		Click on the **Search** button.	OK Cancel Search More More Info >>>
4.		Details of the school or not known status will be displayed in the bottom half of the screen. Click on the school name or not listed. Click **OK.** The school details have now been entered.	School Search Find | Add School: oratory School Alias: School Postcode: Schools: Oratory RC SW3 / Oratory RC SW3 OK / Cancel / Search / More / More Info >>> School Name: Oratory RC SW3 House Name/Flat Number: pury Walk Building Number & Street Name: Cile Street Town/City School Phone Number: 0207 589 5900 Post Code: SW3 6QH
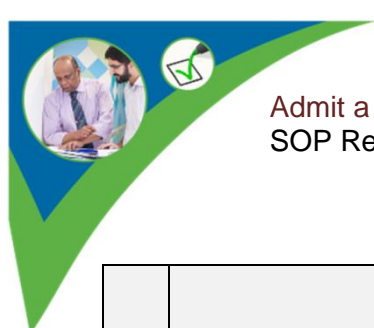
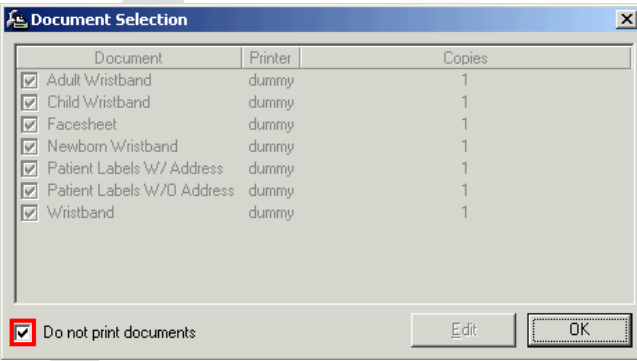|	**Activity**	**Additional Guidance**
5.	If the patient has been home schooled, enter a comment in the **Comments** field.	Comment Child Home Schooled
6.	Enter **No** in the **Is Child Known to Social Care?** field if the details are not on the referral.	Information if Patient is a Minor Is Child Known to Social Care? Social Worker N No Yes Search for School...

iii.   Cannot be Obtained
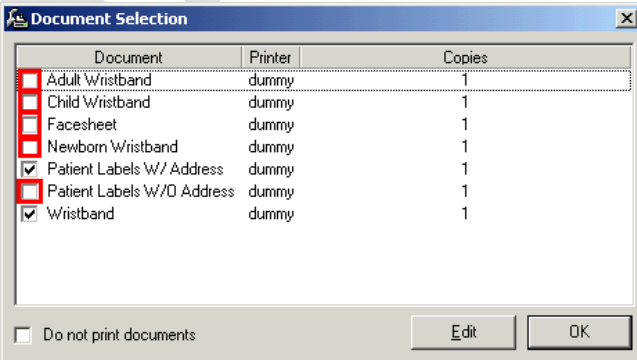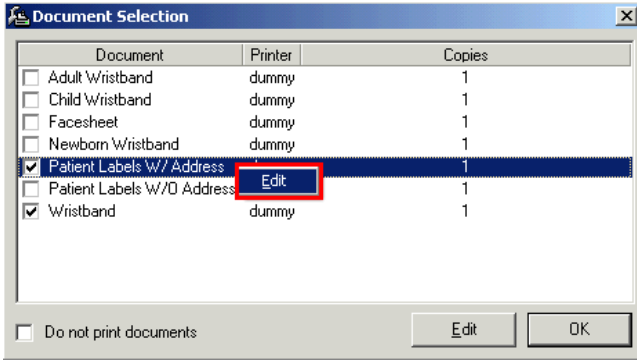
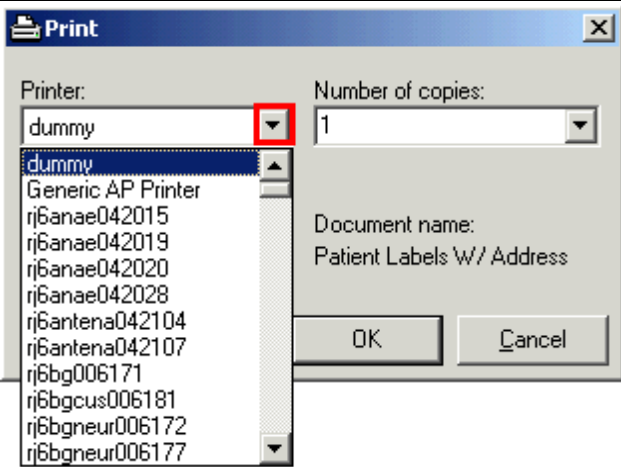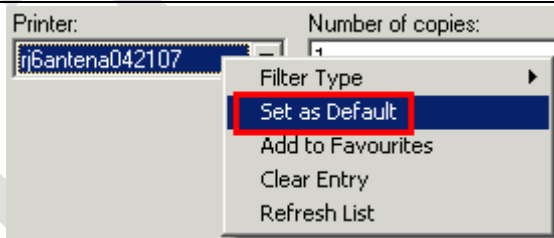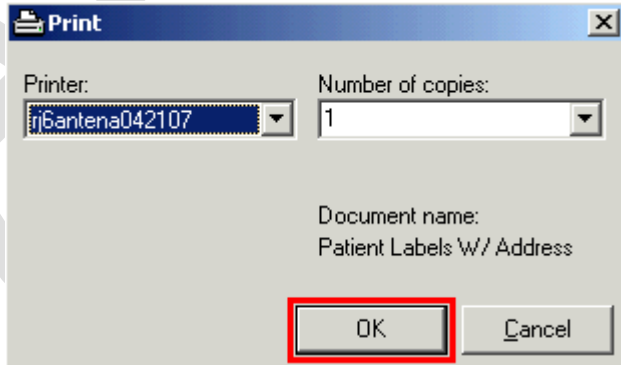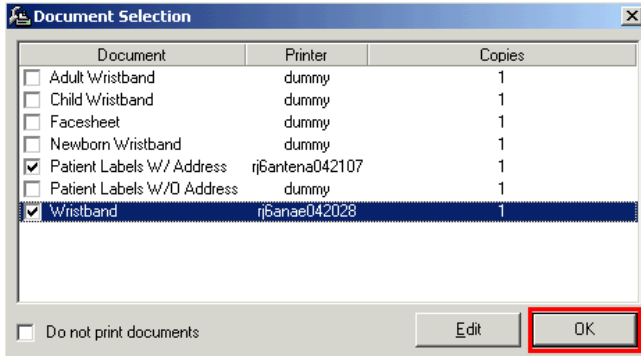|	**Activity**	**Additional Guidance**
1.	If the parent/guardian information is not available at this time, **Unable to Obtain** can be selected. The parent/guardian information must be obtained the next time the patient presents in the Trust. If the patient/guardian refuses to give their information, this must also be recorded on Millennium.	
2.	Click the **Parent/Guardian** tab.	Next of Kin Parent/Guardian Emergency Contact
3.	Select **Unable to obtain** from the **Reason Not Obtained?** field if the parent/guardian details are unavailable at this point. Select **Refused to provide** from the **Reason Not Obtained?** field if the patient has refused to disclose the Parent/Guardian details.	Reason Not Obtained? Refused to provide Unable to obtain

9.7. **Appendix 7 – Printing Documents on admission**

Summary

- The option to print documents is presented when a patient is registered, when an appointment is booked and when a patient is admitted to a ward.
- This appendix covers how to print documents when **Document Selection** appears.

	Activity	**Additional Guidance**
1.	Only documents available to print for the patient will be listed. To **print** any of the documents, un-tick the box next to **Do not print documents.**	
2.	The **Document Selection** window opens for editing. Uncheck all the documents that don't need to be printed i.e. in the screenshot, only the Wristband and Labels will print.	
3.	Check that the printer names against the documents are correct. If they are not correct, right click the document and click **Edit**.	

	Activity	**Additional Guidance**
4.	Select the correct printer name from the drop down menu.	
5.	If you wish to set this printer to be default for printing this type of document, right click on the **Printer** and click **Set as Default**. Otherwise, proceed to the next step.	
6.	Check and if required, change the number of copies. Click **OK**.	
7.	If there more documents that need the printer changed, go back to **step 3** and repeat. Otherwise, if all of the documents are ready to be printed, click **OK**.	
8.	The document will now be printed to the selected printer. Return to the main process **Inpatient Elective Admission Conversation** on **page** Error! Bookmark not defined.**, step** Error! Reference source not found.	

Right every time