

## Policies and Procedures

Function: <b>Leadership</b>	Practice:
Subject: After Hours Access to Care and Continuity of Medical Information	Date Issued: Page: <span style="float: right;"><b>1 of 1</b></span>

**POLICY**

All patients of **(Name of Practice)** will be provided access to provider services and care after-hours and on the weekends.

**PROCEDURE**

- I. A provider is on call 24 hours a day, 7 days a week.
  - a) After-hours and weekend calls to **(Name of Practice)** are answered by an automated message that states "You have reached the **(Name of Practice)** after normal office hours, if you have an emergency please call 911 or go to the nearest emergency room. If your call is not an emergency and you wish to speak to the on-call provider, press 1."
  - b) Calls requesting the provider are then transferred to the answering service **(Name of Answering service)**. A detailed message is obtained, and the answering service **(Name of Answering service)** pages the provider on-call. The provider-on call returns the call to the patient within 2 hours.
  - c) If the on-call provider determines that patient's need(s) are urgent then the patient is assisted with locating the nearest ER.
  - d) If the on-call provider determines that patient's need(s) are non-urgent, but care is required, then the on-call provider will provide patient(s) with clinical advice or will assist patient with locating the nearest non-ER facility. A list of non-ER facilities is maintained in front desk binder and
  - e) Provider on-call has remote access to the patient's electronic health record. Provider on-call can review and search patient records and record after hour activities by logging into the EHR remotely. Clinical advice given after hours or on the weekend is documented by the provider on-call in the patient(s) clinical record within 24 hours of communication with the patient.
  - f) Spot checks are conducted in one week intervals utilizing the after-hours telephone log; preformed every 6 months to determine the practices ability to maintain the PCMH standard.

Contact information for **(Name of Answering service)** Phone #:  
Email:

<b>Reviewed:</b>					
<b>Revised:</b>					
<b>Accepted:</b>					