



Lancashire & Cumbria Consortium of Local Medical Committees

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NWAS Calls – A note from your LMC Chief Executive

The LMC have had several recent enquiries from Practices who have been contacted by NWAS while attending a patient due to a 999 call.

Practices have asked us what their contractual responsibilities are as some report that NWAS crews have told Practices it is their contractual responsibility to support the crews.

Practices should aim to support their patients by cooperating with other organisations who may also provide care to their patients. However, there is no contractual obligation for Practices to give clinical advice to NWAS crews.

We know that General Practice is extremely busy, as are our colleagues in NWAS. They wish to assess and conclude appropriate disposition of the patient while Practices are simultaneously dealing with patient clinics and other urgent matters.

There should be senior clinicians in the NWAS control centre (or other locally commissioned alternatives) available when NWAS crews have a clinical query. Sometimes, crews may need to contact the GP Practice to gain medical history, which your administrative team may be able to provide from the patient medical summary.

It is the choice of the Practice if their team give advice to NWAS crews but is not contractual and Practices are under no obligation to respond in certain time frames as some have reported they have been told they must by NWAS crews.

Practices may wish to consider a policy which may cover:

- Ascertaining the reason for the NWAS contact to the practice.
- Provide medical history relevant to support NWAS assessment of the patient.
- Escalate the contact to appropriate clinician if the practice has chosen to do so.
- Informed NWAS of possible time frames of any response.
- Practice may offer advice if they choose but may also redirect NWAS colleagues to their own clinical supervision and advice pathway.

If offering clinical advice to an NWAS colleague, do consider that you are advising based on a clinical assessment you did not perform and so you must be confident in that assessment. There may also be numerous indemnity issues to consider when providing advice to clinicians who are not regularly under your clinical supervision.

We have discussed with both NWAS and the ICB that if a service involving urgent Practice response to NWAS crews which may include clinical advice was expected, this would be non-core GMS and would require an enhanced service specification.

If you are having contacts from NWAS where you are experiencing requests that are outside your contractual obligations or reasonable Practice policy, then do send us examples so we can raise directly with both NWAS and the ICB.

Dr Adam Janjua

Chief Executive Officer

Lancashire and Cumbria Consortium of LMCs

A handwritten signature in black ink that reads "Adam Janjua". The signature is written in a cursive style with a horizontal line above the name.