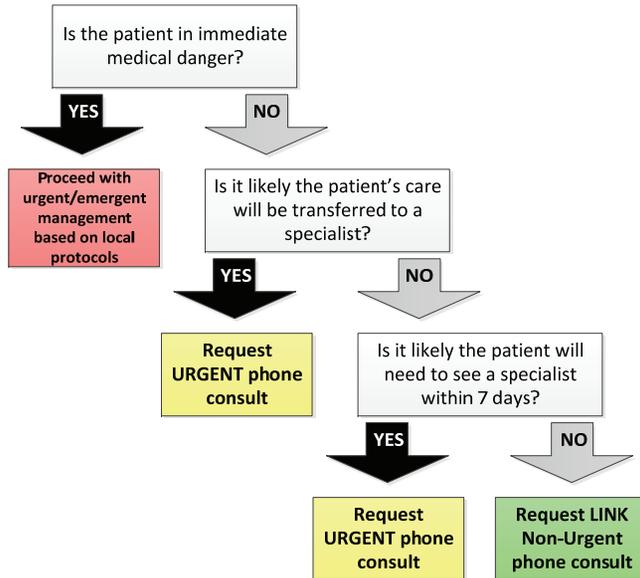




Info for FAMILY PHYSICIANS

How is urgency determined?

When determining whether to request a specialist for an urgent or non-urgent telephone consultation, providers should consider:



How do I request the LINK service?

Call ACAL or Bedline as you would normally. For ACAL, select the non-urgent option from the initial menu. For both ACAL and Bedline, **inform the operator that you are requesting a LINK non-urgent call as soon as the call is answered.**

When is it available; with which specialty?

The LINK 3-month pilot launched in February 2016 with Adult Psychiatry.

I practice in an urban area. Can I use LINK?

Yes. LINK's non-urgent phone consultation service is intended for all primary care providers, not just those in rural areas.

How should referrals be directed?

Please do not change your existing referral practices as a result of calling the LINK service. The specialists on-call are providing service to the province, and are not expecting to generate referrals through this service.

If a referral is appropriate, discuss the options with your patient.

Will ACAL and Bedline services be altered?

No. The new LINK service for non-urgent consultations is complementary to the urgent phone service. There will be no change to the urgent/emergent phone services supported by ACAL and Bedline.

Are LINK calls recorded?

Sometimes. Calls will be recorded during periods of low call volume when ACAL and Bedline operators have capacity to connect the parties and host the call.

In periods of higher call volume, the operator will take the caller's contact information, hang up, then dial the specialist and pass on the request. These calls are not hosted by ACAL or Bedline and therefore not recorded.

What should I expect during the call?

Primary care providers should expect an educational, collegial conversation. At the end of the call, the specialist will ask your opinion of the call's impact using very brief survey questions that will take about one minute.



Adult Psychiatry consultations now available

To provide feedback or request the involvement of a specialty group, call the service administrator at:

1-844-855-LINK

or by email at:

LINK@health.gov.sk.ca





Info for SPECIALISTS

How are LINK specialties selected?

LINK will be piloted with Adult Psychiatry to confirm demand and evaluate impact on patient care. Future specialties will be recruited based on demand from primary care providers.

How many specialists are needed?

Any specialty may provide the LINK service as long as there are four or more individuals across the province willing to share the call schedule.

Who is remunerated? How?

Specialists will receive a stipend for being on-call to provide the LINK service. Specialists may also bill for a telephone consultation if fee code criteria are met.

Family Physicians may not bill for using LINK.

How long does a typical call last?

Calls are expected to last less than 15 minutes.

What are the Hours of Operation?

The LINK service is available during typical primary care office hours: 8:00 AM–5:00 PM, Monday – Friday, excluding statutory holidays.

Is LINK a provincial service?

Yes. Specialists provide the service to primary care providers from across the province.

What is expected of the specialist?

Specialists are expected to answer the physician or nurse practitioner's clinical question in a collegial manner. The call should be educational for the primary care provider so the knowledge shared can be applied to a similar patient situation.

What is the LINK Log?

For every call, the Specialist will fill out a LINK Log available in the EMR; a form that can be completed in about a minute, then faxed/emailed to the Ministry.

What is the LINK Log info used for?

The information gathered from the LINK Log helps:

1. Identify demand for specific clinical supports;
2. Assess LINK's impact directing appropriate care decisions, and avoiding inappropriate treatments, investigations, referrals and ED visits; and
3. Evaluate the service and identify improvements.

Should calls be answered immediately?

While it is preferred that calls be answered immediately, circumstances will not always support that level of service. When it is not possible to answer immediately, calls should be returned within 15 minutes while the patient is likely still available to participate in the call.

Will LINK impact referral patterns?

LINK is neither intended nor anticipated to affect referral patterns. The specialist on call should not expect to receive direct referrals as a result of providing the LINK service. If a referral is warranted, primary care providers will follow their existing referral practice.

Can I be on-call for acute and non-urgent?

It is recommended that a specialist is not on call for both acute and non-urgent consultation calls at the same time, to ensure that capacity always exists to address urgent patient issues.



What is LINK?

Leveraging Immediate Non-urgent Knowledge, or LINK, is a **telephone consultation service** to give primary care providers and their patients rapid access to specialists for issues that are non-urgent, but concerning all the same.

What does LINK achieve?

LINK provides **patients** with immediate access to specialist expertise, within the convenience of a primary care visit.

Primary care providers gain from the educational experience and are supported to work to their full scope of practice.

Specialists should notice that they receive more appropriate referrals with relevant diagnostics. The **health system** wants to support appropriate clinical decisions regarding referrals, treatments, diagnostics and prescriptions.

How does LINK work?

With the patient present (ideally) primary care providers can call Saskatoon's Acute Care Access Line (**ACAL**) or Regina Qu'Appelle's Physician Access Line (**Bedline**) to request a non-urgent LINK consultation with a specialist, and should **identify the call as a LINK call as soon as the operator answers**.