

## HOW TO USE THE PRF ACS ACCESS SCREEN



We are the ones. 111

To access the Ambulance Care Summary (ACS) for Wellington Free Ambulance patients visit: <u>https://acs.wfa.org.nz</u> For patients who present with a St John ACS advice sheet visit: <u>https://acs.stjohn.org.nz</u>

Enter the unique access code written on the ACS advice sheet and enter the patients' date of birth (DOB). DOB will need to be provided by the patient. DOB is the security key to access the ACS and ensures patient privacy.

CareMonX <sup>**</sup> eTriage		
	Please enter:	
	Ambulance Care Summary Access Code:	
	Patient Date of Birth: D D M M Y Y Y Y	
	Show 🧭	

Once the ACS has been used to access the complete report for the patient, ensure that you have printed it off or saved electronically.

After this is complete there is no further need for the ACS so it can be discarded or filed. If you decide to file it you will need to write either the patients DOB or NHI on the form to allow you to find the record at a later date. Please note the ACS code is valid for clinicians to access for 21 days from date written. It states 7 days on the ACS purely to encourage patients to follow up with their GP earlier.

## **TESTING ACS ACCESS**

To test the ACS access you can use this example job below:

Master incident number - Job number =	9000
Date of job =	01/04/2017
Time of recording info on ACS advice sheet =	08:00 AM
ACS code =	99 2BB B9E 34
Date of Birth =	25/04/1992

DOB is not recorded on advice sheet as it is the security code and needs to be obtained by the patient to access the record.

See example ACS form on next page.

Ambulance Care Summary Advice Sheet  Inddent number Patient name Patient name	Advice to patient Clinical Impression We are the ones. 111 Mild asthma/chest infection
9,0,0,0 Mr Test Tester	advice/Plan - see GP today at 10:30am
Day         Month         Year         Time           0         1         0         4         2         0         1         7         08         00	for new ventolin prescription and get reassessed for chest
Accessing your ambulance record	infection
You can access a copy of your ambulance care summary within the next 7 days of the cate and time above, using the unique access code below at <a href="https://acs.wfa.org.nz">https://acs.wfa.org.nz</a>	
	- If your condition worsens, or
Access code $[9,9]$ $[2,B]$ $[B,9]$ $[E]$ $[3,4]$	- If your condition worsens, or you have concerns please contact III or seek medical advice.
If you have any questions please contact us on: 0800 WFA PRF (0800 932 773)	If your condition changes, but it is not an emergency, please contact your doctor or freephone Healthline on
Privacy and your health information Wellington Free Ambulance recognises the importance of protecting an individual's privacy and is fully committed to following the regulations set out by the Privacy Act 1993, Health Information Code 1994 and related privacy	0800 611 116. • In the event of an emergency always call 111. • If you see another healthcare provider (for example, a doctor or nurse) in the next 7 days, please give them this form; they can use the code overleaf to find out more about the treament you received from Wellington Free Ambulance.
legislation. #	Tick appropriate box below:
Go to http://www.wfa.org.nz/privacy:	I understand and I am happy with the advice provided above. These details
To learn more about information collected by Wellington Free Ambulance     For access to your personal and health information     To make corrections to your personal and health information	accept responsibility for my refusal to accept treatment and / or transport to hospital. Patient signature: $M = \frac{1}{2}C + P d$
Or contact us in writing at: Clinical Services, c/o Wellington Free Ambulance, PO Box 601, WELLINGTON 6140	to your
Or email us at: clinicalservices@wfa.org.nz	Paramedic signature: PARAMED PIN: [1411] electronic patient report form.

Once correct details are entered the next screen will appear:

Close							PDF
I		\$	Find   Next				
Ambulance Ca Ambulance Master Inc		-	<sup>4/01</sup> D	RAF	Г		
Incident Inform	mation						
Date and Time of Cal	l:	Dispatch Time:	Responding:	At Scene:	At Patient:	Depart Scene:	At Destination:
01/04/2017 08:00		01/04/2017 08:01	01/04/2017 08:02	01/04/2017 08:10	01/04/2017 08:12	11/04/2017 08:45	
Final Patient Status:	3-Unl	ikely threat to life	Dispo	sition: Treat an	nd Refer	Ambulance cal	I sign: NAT7
Destination:					Referral	Pathway:	GP surgery appointment
ACC Claim Number:							
Incident Location:	Home				Location 1	Гуре: Но	ome
Clinicians Attending:	136345	Chris	topher George				
	600855	Paul M	Valcolm				
Patient Informa	ation						
NHI Number:			Name: Mr	Test Tester			
Sex:	Male		DoB: 25/	04/1992	A	ge: 24 Yea	·(s)
Address:	2 Harri	ison Road, Mount Welli	ngton, Auckland, 106	0, New Zealand			
Home Phone:			Work phone:		M	obile phone: 02	10123456

Note: DRAFT is shown at the top of this case because it is an example. Real cases will be submitted and will not be shown as DRAFT

Select PDF and the ePRF system will format the ACS into a printable format which will allow you to print the record off or save it on your patient record system.

## **NEED HELP?**

Any ACS queries please the relevant helpdesk: Wellington Free Ambulance 0800 932 773 St John 0800 473 876