

## LMC advice on the subject of referral form templates

#### The purpose of this guide

Our goal is to ensure exceptional care of patients through appropriate, succinct and timely referrals between primary and secondary care while minimising the impact on workload for clinicians involved. This guide is intended to highlight the issue of unnecessary forms and to help colleagues decide if a referral template is going to improve communication over a referral letter. We also hope this guidance streamlines templates to follow due processes.

#### Current concerns

There is an increasing reliance on referral templates by secondary and community care providers. This can be time-consuming to complete and sometimes referrals are rejected if they are incomplete or on an ‘old’ form. This may cause unnecessary delay or potential harm to patients. We are also finding that a significant proportion of templates are released without the content being endorsed by the LMC or even integrated into General Practice IT systems.

#### National guidance on referral templates

The use of referral forms is **not mandatory** and **providers cannot reject a referral on the basis of being either on the wrong form or no form.**

This is made clear in the [joint guidance by NHS Digital/GPC](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdigital.nhs.uk%2Fservices%2Fe-referral-service%2Fjoint-guidance-on-the-use-of-the-nhs-e-referral-service-2018%2312-use-of-templates-and-pro-forma&data=05%7C01%7Ccatherine.ievers1%40nhs.net%7C782470e301974e479ed808db0db3deb7%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638118838406950594%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=0RHKXZDBL9Ut10olx49f1NxbewHFH6BZoQF5kvzJSAU%3D&reserved=0): *"Any provider of NHS services receiving a referral via e-RS, should accept clinical referral information in whatever format has been approved for use by the referring/commissioning organisation and endorsed by the responsible LMC.*So long as adequate and appropriate clinical information has been added to the e-RS referral, providers should not refuse to accept a referral simply because it is not on their locally-branded template."

On the other hand, referral letters can be comprehensive. As per [section 12 of the NHS Digital guidance](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdigital.nhs.uk%2Fservices%2Fe-referral-service%2Fjoint-guidance-on-the-use-of-the-nhs-e-referral-service-2018%2312-use-of-templates-and-pro-forma&data=05%7C01%7Ccatherine.ievers1%40nhs.net%7C782470e301974e479ed808db0db3deb7%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638118838406950594%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=0RHKXZDBL9Ut10olx49f1NxbewHFH6BZoQF5kvzJSAU%3D&reserved=0), it is possible for e-RS to easily ‘pull’ data from GP records and quickly construct a referral ‘letter’ which saves time for GPs and administrate staff.

#### Template Considerations

We understand that in some situations, forms are helpful for all involved. If you are considering introducing a form over a referral letter, this needs to illustrate an improvement from the existing process for both clinicians and patients.

Please consider the following prior to deciding if you would like to create/update a referral template:

1. In this situation why is a form needed rather than a referral letter?

2. Is this an update on a previous process? If so, what is the reason for changing this?

3. What are the benefits for primary care of using this form?

4. What are the benefits of secondary care by using this form?

5. What information is absolutely essential to be able to process the referral?

a) Please consider removing anything that isn't essential. If a question is only relevant to a particular subgroup, can this be explained?

A good form is a **short form (one page).** As covered in the [joint guidance by NHS Digital/GPC](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdigital.nhs.uk%2Fservices%2Fe-referral-service%2Fjoint-guidance-on-the-use-of-the-nhs-e-referral-service-2018%2312-use-of-templates-and-pro-forma&data=05%7C01%7Ccatherine.ievers1%40nhs.net%7C782470e301974e479ed808db0db3deb7%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638118838406950594%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=0RHKXZDBL9Ut10olx49f1NxbewHFH6BZoQF5kvzJSAU%3D&reserved=0) ‘Since patients have the right to choose to be referred to any provider in the country for elective (as opposed to emergency) care and, therefore, may have several providers listed on their e-RS shortlist, referral templates and pro-forma should be as generic as possible’.

6. If blood tests are requested, how recent do they need to be? We have agreed 12 weeks is usually good enough for the majority of tests – sometimes it may be even longer. If shorter than 12 weeks please explain the rationale for this.

a) If a blood test is requested, rather than rejecting the referral, it could be possible for this can to be requested by the trust via the community investigation hub.

7. Has the form been optimised for EMIS? If not please contact Jess Brown, Digital Programme Officer, NHS Somerset ICB, ([jess.brown@nhs.net](mailto:jess.brown@nhs.net)) so that it can be.

##### And finally

If you would still like to go ahead with a form, this will need to be agreed upon with the Somerset ICB and Somerset LMC. For this review to take place, we would appreciate it if you could complete our form! We are of course able to review your proposal in an alternative format.

Best wishes,

The LMC Team

**Reasons for a new form for referral template**

|  |  |
| --- | --- |
| Name of contact |  |
| Why is this form required over a referral letter? |  |
| What are the benefits for primary care? |  |
| What are the benefits for secondary care? |  |
| Please explain why all details have been included. IS this all essential*. All forms ideally should be one page long.*  What will happen if the form is not fully completed? |  |
| If blood tests are requested, these need to be essential. What is the rationale of the test and how recent do they need to be? |  |
| Please confirm that this form is integrated into EMIS before being in use. |  |
| Please consider adding to the subheading of your form that completion of the form is appreciated for triage, but remains **non mandatory** |  |
| Please provide evidence that this has been approved by the ICB. |  |