

NHS Cheshire and Merseyside ICB position on referrals from Private practice to Secondary Care

Background

Patients privately consulting both General Practice and consultant colleagues sometimes require onward referral into NHS secondary care services. There have been instances whereby these referrals have been rejected on the basis that they were not done via the eRS system. As not all private providers have access to eRS this is leading to difficulty.

We understand that there is concern from Secondary Care that referrals received from private providers in this way may not result in payment from the Commissioners (the ICB).

Consequences

When privately practising referrers are encountering this problem, their only recourse is to send the patient to their NHS GP asking them to undertake a referral. This is creating additional unnecessary demand into an already stretched Primary Care service. Patients are also experiencing delays and inconvenience trying to navigate this additional step. Patient may, in fact, be told by their NHS GP that they should return to their private service and insist they undertake the referral. There is potential for patients to be stuck in the middle.

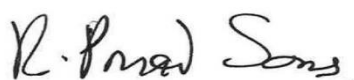
ICB position

We have already written a letter making it clear that NHS Trusts should accept referrals made from private consultant colleagues.

This ICB position statement is to make it clear that NHS Trusts should also accept referrals made from private GP colleagues and that this activity will be paid for by the ICB. Referral by eRS (or other proforma) is not required assuming that all relevant information is provided within the referral letter.

Clearly, we would expect all referrals, both from the NHS or private sector, to meet the access criteria and thresholds for the service being referred to. We would also expect referrers to include the ODS code of their private practice as the referring practice code to help track activity.

The ICB will monitor numbers of referrals outside of eRS and reserve the right to audit referrals if an excessive increase in referrals is seen.



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