

Advice and Guidance - a tool to support referral management in Choose and Book

Introduction

This guidance has been prepared for the following reasons:

- To help organisations understand when and how the Advice and Guidance (A&G) functionality might be used
- To share examples and approaches of how different organisations have used Advice and Guidance
- To explore factors that have led some organisations to implement Advice and Guidance
- To describe some of the benefits and expected outcomes that can be achieved by using the Advice and Guidance functionality within the Choose and Book application.

The guidance will cover:

1. What is Advice and Guidance and when might it be used
2. Benefits that have been identified when using Advice and Guidance
3. How a service indicates that it will provide advice to requesting clinicians
4. Does the use of Advice and Guidance affect the patients 18 week RTT clock
5. How Advice and Guidance is working for NHS organisations (e.g. in primary care/PCT/secondary care)
6. How to change advice response into a booking request, ensuring patient is still offered choice where clinically appropriate
7. Is there a tariff for Advice and Guidance
8. Monitoring who and how often Advice and Guidance is used

1. What is Advice and Guidance and when might it be used?

Advice and Guidance (A&G) allows one clinician to seek advice from another. Unlike creating a booking request, where a number of providers can be selected, Advice and Guidance is a communication between two clinicians: the “requesting” clinician and the provider of a service (the “responding” clinician). The requester is able to attach documents to the advice request, which may include diagnostic results, scanned images (e.g. ECGs) or previous correspondence related to the patient. The responder is then able to review the request (along with any attachments that may have been added) and, if required, add attachments, such as a proposed treatment plan or links to external documents and websites, before sending a response back to the requester.

The reasons why a clinician may wish to seek Advice and Guidance include:

- Asking another clinician/specialist for their advice on a treatment plan and/or the ongoing management of a patient
- Asking for clarification (or advice) regarding a patient’s test results
- Seeking advice on the appropriateness of a referral for their patient (e.g. whether to refer, or what the most appropriate alternative care pathway might be)
- Identifying the most clinically appropriate service to refer a patient into (and how to find that service – e.g. what clinical term to search on).

This functionality has always been available within Choose and Book, but has not been made available by all provider organisations. It is often not utilised to its maximum potential by referrers, nor promoted within local health communities. Therefore, all the benefits of using Advice and Guidance have not been fully realised.

2. Benefits that have been identified when using Advice and Guidance

Patient

- The patient only starts the formal referral process once appropriate advice has been received (indicating the best clinical pathway or management route)
- Patients do not book an appointment that may subsequently be cancelled and redirected to another service, or rejected
- Overall better patient experience of using Choose and Book.

Requesting clinician

- Used as an education resource, for the clinician – this may help with future management of patients
- Reduces the risk of a redirection or rejection of the referral and will better ensure that the correct services are offered to the patient
- May enable the patient to be managed in a community setting, with no need to refer to a secondary organisation.

Provider clinician

- Only patients that need to be in the service are seen by the specialist – more cost effective use of clinician time and expertise
- Advice can be given regarding appropriate diagnostic tests required before an appointment is booked
- Referrals can be channelled to the correct consultant (this is especially useful if named clinician referrals are enabled).

Practice Based Commissioners (PBC)

- Provides for greater confidence that the referrals reaching secondary care are appropriate for that setting
- If a patient can be treated in another environment this may result in some savings for the PBC group (which might allow them to reinvest in other services for their patients)
- It might also help to support GPs to be aware of alternative services available within the community setting.

Provider organisation

- If only the clinically appropriate patients are booked into a clinic, there will be an ease on the demand for a service, as inappropriate patients are not taking slots that are more appropriately needed by others
- This will help the provider organisation ensure that the patient's pathway is kept to a minimum and that delays are not introduced due to the need to redirect patients
- If the patient is booked into the right place at the right time, less administrative time is taken up ensuring that the patient is moved and seen in the correct service
- Providers should be better able to manage their 18 week RTT times, as patients who are eventually referred should be better clinically prepared
- There will be a reduction in the number of patients that find themselves in the Appointment Slot Issue (ASI) process and have to be managed outside of Choose and Book by the provider organisation.

Primary Care Trust (PCT)

- Every patient that is seen in an inappropriate service then followed up in the correct service has a direct financial implication to a PCT. The PCT is being charged for each appointment
- If a patient is booked into an inappropriate service this will have a direct result on the waiting times for the service and will be reflected in the patient's pathway and the ability to achieve 18 weeks RTT times for the patient.

3. How a service indicates that it will provide advice to requesting clinicians

When setting a service up on Choose and Book, a number of factors need to be considered, one of which is whether to offer Advice and Guidance (i.e. will the service that is being set up provide advice back to referring clinicians?)

If providers are going to offer advice they must consider:

Review and response process

- If clinicians are reviewing on line or through a central admin team
- How the responses will get back to the requesting clinician
- How to ensure the service can be provided consistently e.g. holiday and sick leave are covered.

Agreed turnaround time for response

- How quickly the requesting clinician will receive a response – agree an acceptable timeframe.

Service definer's role.

- Ensuring that the service is enabled to support advice as well as appointment requests
- Ensuring that the correct clinicians have access to the service and are in the correct workgroup to allow them to easily process the request.

If a service is **not** enabled to offer advice, then, if a requester selects 'advice' and adds search criteria (e.g. Clinical Term, Speciality/Clinic Type or Named Consultant), this service will **not** be returned – i.e. only those services that have indicated they will provide advice will be displayed.

Full guidance on application functionality is given in Appendices 1-7.

4. Does the use of Advice and Guidance affect the patients 18 week RTT clock?

If the requesting clinician is seeking advice prior to (or instead of) referring a patient, then this has no impact on the commencement of the patient's clock start.

The 18-week clock start date is the date that the provider receives notice of the referral. This date needs to be recorded so that the Referral to Treatment (RTT) time of the patient can be tracked. Further information is available at

www.chooseandbook.nhs.uk/staff/overview/18weeks/cab18wks.pdf

For Choose and Book referrals:

This will be the date that the patient converts their Unique Booking Reference Number (UBRN). Where the referral is rejected by the chosen provider and subsequently re-referred, the original conversion date still applies. For rejected referrals it is important that any re-referral is linked to the previous referral in Choose and Book, to ensure the correct RTT start date can be derived by the Secondary User Services (SUS).

Where the Choose and Book Appointments Slot Issue (ASI) process has been invoked, the referral request received date will be the date that the provider receives electronic notification from The Appointments Line (TAL) that the patient has experienced slot unavailability and wishes to book an appointment with them. This is **not** the date that the provider opens or actions the electronic notification (which may be later). The process for managing referrals subject to appointment slot issues is described in the guidance at: http://www.chooseandbook.nhs.uk/staff/implement/guides/index_html

5. How Advice and Guidance is working for NHS organisations

Here are some examples of organisations that are using Advice and Guidance on a regular basis.

NHS Bournemouth and Poole

NHS Bournemouth and Poole is a PCT with 45 GP practices and covers the geographical area of Bournemouth and Poole on the south coast. Within the Bournemouth and Poole conurbations there are two acute foundation trusts;

- The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
- Poole Hospital NHS Foundation Trust

During 2009, hospital referrals increased by 19% from GPs and GDPs to a point where it would have caused financial concern for the PCT, if this increasing level of activity had continued. The immediate need to alleviate the pressure resulted in Practice Based Commissioning (PBC) locality groups, in agreement with the PCT, implementing Advice and Guidance as a triage service to filter inappropriate referrals, support GPs, gather greater referral intelligence and utilise more primary care services.

A number of clinicians, either GP's with special interests, GPs or secondary care clinicians were approached by the PBC groups to ask them to triage the advice requests and respond in one of three ways:

- provide advice on how to continue to manage the patient within the practice setting
- advise if the patient needed to be assessed/treated in a primary care community clinic
- advise if the patient might be best managed within a secondary care setting (and provide advice on the correct service to refer the patient to).

This service commenced in October 2009 and will be continuing into 2010/11.

The advice response goes back to the referring practice where it is reviewed by the requesting GP. The reviewing clinician also gives advice about any diagnostics that may be required to help with the future management of the patient.

If an onward referral to either a primary or secondary care provider is required, this process is completed by administration staff, using the information returned to ensure that the correct services are selected. The patient is offered choice of site and/or provider, wherever appropriate.

(Note: the patient may choose to go to a provider other than that which gave the original advice, however the response to the original advice still forms part of the referral information within Choose and Book).

During three weeks in October 2009, 169 GI, Liver and Endoscopy advice requests were reviewed. The findings of the reviewer were:

- Only 43% contained the appropriate clinical information for a referral into a secondary care provider

- 29 referrals were advised that a referral direct to a diagnostic test were clinically indicated, thus saving the outpatients appointment with a saving of approx £4000
- 5 referrals were given advice to be treated with in the practice setting and did not require referral into secondary care
- 9 advice requests were asked for further information
- 6 advice requests were changed to fast tracks

All GP's were informed by the reviewer of their findings on an individual basis.

The PBC groups are monitoring and reviewing the processes with a particular interest in the referral trends and outcomes that go to a secondary care provider. The PCT is reviewing the intelligence gathered from the process to help inform their future commissioning plans. Services that are currently only provided within a secondary care setting but which could be delivered within the community setting, are being identified and commissioned as community services. This is part of the 'Transforming Community Services' and 'Delivering Care Closer to Home' initiatives. The success of this initiative will be determined by evaluating the evidence collated and will be available in March 2010.

NHS Havering

NHS Havering covers the London Borough of Havering, which is approximately 20 miles from central London, with 52 GP practices/ health centres.

The local acute trust is Barking, Havering and Redbridge University Hospitals NHS Trust.

NHS Havering were made aware of a similar service that was being provided locally to them, but not through Choose and Book. They were able to identify very quickly the potential cost savings that would be released by piloting an Advice and Guidance service using Choose and Book.

They commenced a pilot to provide haematology advice to GP's to see if there would be an impact on the number of patients that were referred for an outpatient appointment at the local acute trust. The pilot was initially set up to run from 1st October 2009 to 31st December 2009. This is a community service which is consultant led. The service advised on:

- further, useful, practice-based investigations and their interpretation
- the most appropriate practice-based follow up
- formal secondary care haematology referral if appropriate.

During the month of December 2009 a clinical audit was carried out on the pilot, by a consultant Haematologist at the local acute trust. Thirty four advice summaries were reviewed with recorded outcomes:

- 6 cases required referral to an acute trust for an outpatient appointment
- In 6 cases the GPs were advised to request further investigations and then to seek further follow up advice on the results of the investigations
- The remaining cases were given advice on how to manage the patient within the practice setting.

Early indications show that, because more patients are now being cared for in the community, a direct saving of over £13,000 was made for this sample of patients (over an 8 week period). This service will continue into 2010 with a full service review later in the year.

6. How to change advice response into a booking request, ensuring patient is still offered choice where clinically appropriate

The requesting clinician can review the advice response through the Advice and Guidance work list. If the response indicates that the patient will require a referral (and cannot be managed within the practice setting) then the advice response can be easily converted into an appointment request.

If the advice response is to refer to either a community or secondary care setting, then there is the ability to 'update advice request'. This allows the clinician to use the same search criteria used for the advice request, or they can change the search criteria based on the response returned (which will return alternative services). At this point the referring clinician (or admin staff acting on their direct instructions) should offer the patient the ability to choose their provider where appropriate.

The full history of the advice request remains part of the appointment request and can be reviewed by the receiving clinician and as part of an audit trail.

7. Is there a tariff for Advice and Guidance?

There is no national tariff to provide Advice and Guidance. It is already covered within the national Acute Services Contract: in Schedule 3 Part 2 (Patient Booking and Patient Choice) it states:

“The Provider shall offer clinical Advice and Guidance to GPs on potential referrals through Choose and Book, whether this leads to a referral being made or not.”

The full contract can be found at

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_111203

In some local health communities, providers and PCT's have agreed a nominal tariff for Advice and Guidance, to cover some of the administrative costs in setting up such a service. This is anticipated to be recouped by reducing the number of patients who are being referred and managed within a secondary care setting. It is also recognised that this is likely to be far less expensive than setting up administrative referral management centres, which often add no clinical benefit for patients and can be very unpopular with doctors.

8. Monitoring who and how often Advice and Guidance is used

Advice and Guidance requests are recorded in Choose and Book and this information can be reviewed by a number of different roles at different levels.

Organisation	Role	Report Available
GP practice	Referring Clinician Referring Clinical admin	ROR09 - Channel Profile
Provider	Provider Clinician	SPR03 – Activity By SPR04 – Service Referral Analysis
PCT	Information Analyst	COR06 – Channel Profile COR02 – Practice Summary
SHA	Information Analyst	SHR09 – Channel profile

For more detailed information about the reports and information available within Choose and Book: www.chooseandbook.nhs.uk/staff/training/materials/index_html/?searchterm=reports

Appendices

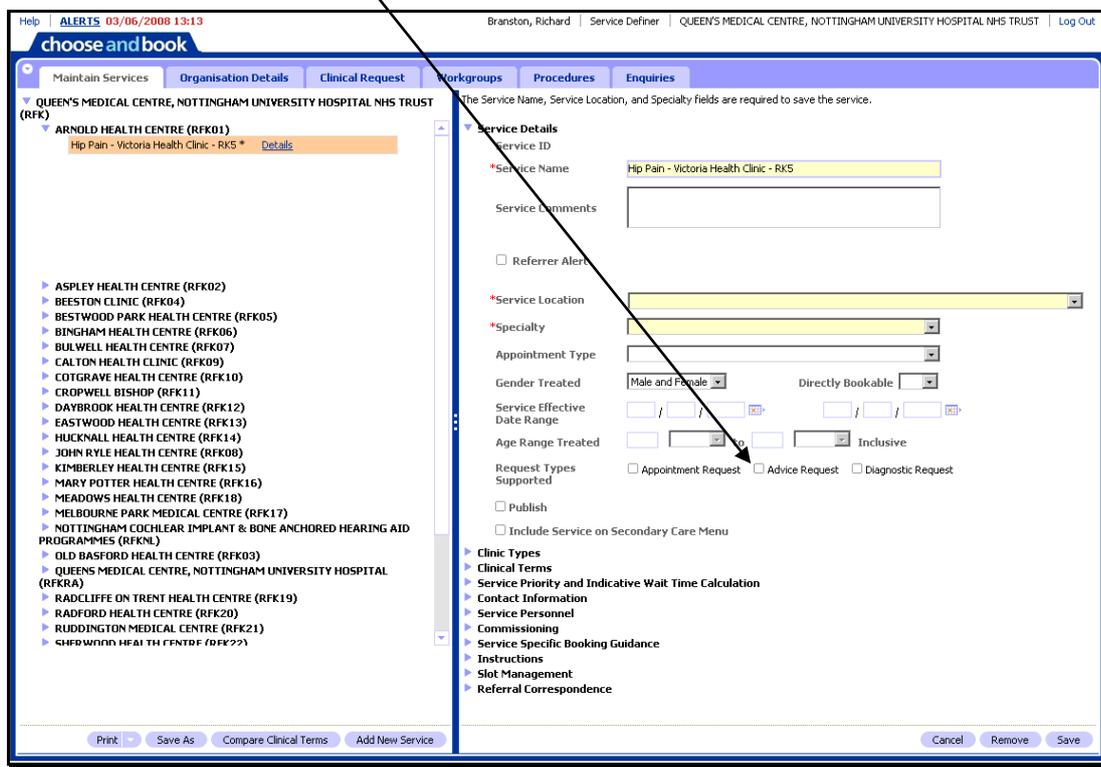
- Appendix 1. How to set up an Advice and Guidance Service
- Appendix 2. How to request Advice and Guidance
- Appendix 3. How to attach a file to a request
- Appendix 4. How to view Advice and Guidance responses
- Appendix 5. How to convert an Advice and Guidance response into a booking
- Appendix 6. How to open and respond to Advice and Guidance requests
- Appendix 7. To add an attachment to an advice response

Appendix 1. How to set up an Advice and Guidance Service.

A service within Choose and Book has to be set up by a service definer. An Advice and Guidance service is set up as any other service, but the service definer **must** ensure the Advice request is also selected along with Appointment Request.

N.B. it is not currently possible to set up a service in Choose and Book to offer Advice and Guidance only.

This is indicated below



The service is then set up as any other service and saved.

For full instruction on how to set up services on Choose and Book for service definers can be found at www.chooseandbook.nhs.uk/staff/training/materials

Appendix 2. How to Request Advice and Guidance

The full manual for **referrers and administrators** can be found at www.chooseandbook.nhs.uk/staff/training/materials

To access the Advice and Guidance part of Choose and Book:

1. Search for and select your patient, then:
2. Click on the refer / advice button on the service search page

You are now at the Search screen.

3. Select Request Type **Advice** from the **Request Type** combo box.



4. Use the service search options to search for clinically appropriate services (see the section on service searching for more details).
5. Click on either the “Search Primary Care” or “Search All” buttons to return the services that meet the criteria used

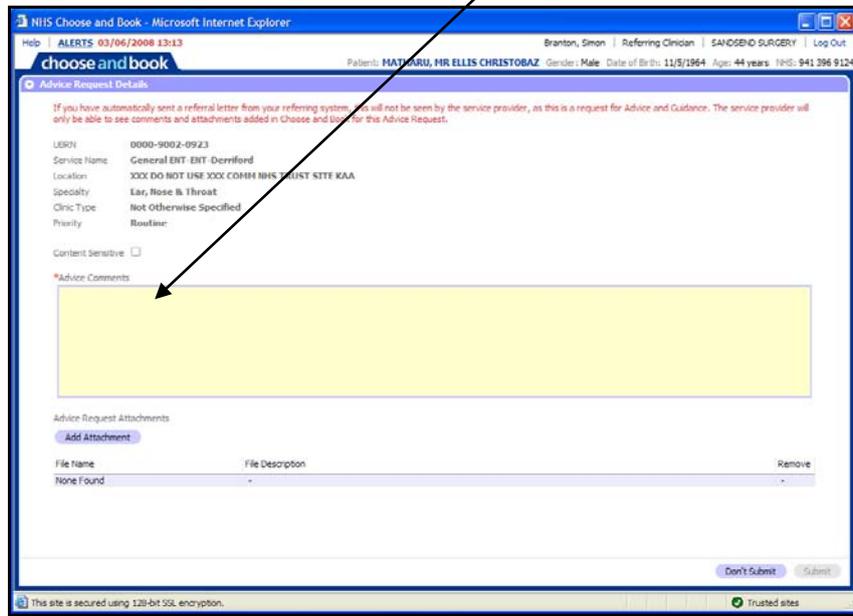
Those services meeting your selection criteria *and* that have agreed to respond to Advice and Guidance requests are displayed (ie. the list will not show those services that have not agreed to respond to Advice and Guidance requests).

6. Select a single service by clicking the radio button in front of that service

Service Results		
Select	Miles	Service Name
<input type="radio"/>	-	General Cardiology - Cardiology - Lincoln Royal Inf - GGG
<input type="radio"/>	1	CAS General Cardiology - Cardiology - Bailhouse Practice - 1V1
<input type="radio"/>	1	General Cardiology- Cardiology - Lincoln Uni Hosp - HHH
<input checked="" type="radio"/>	97	General Cardiology - Cardiology - Mile End Hosp - BBB
<input type="radio"/>	107	General Cardiology - Cardiology - Bow District - CCC
<input type="radio"/>	115	General Cardiology - Cardiology - Sherbourne Royal Inf - EEE
<input type="radio"/>	116	General Cardiology - Cardiology - Frome Infirmary - FFF

7. Click the **Request** button at the bottom of the Service Results screen.

8. Type your question to the advisor in the yellow box. This is the only mandatory entry



9. Press the **Submit** button

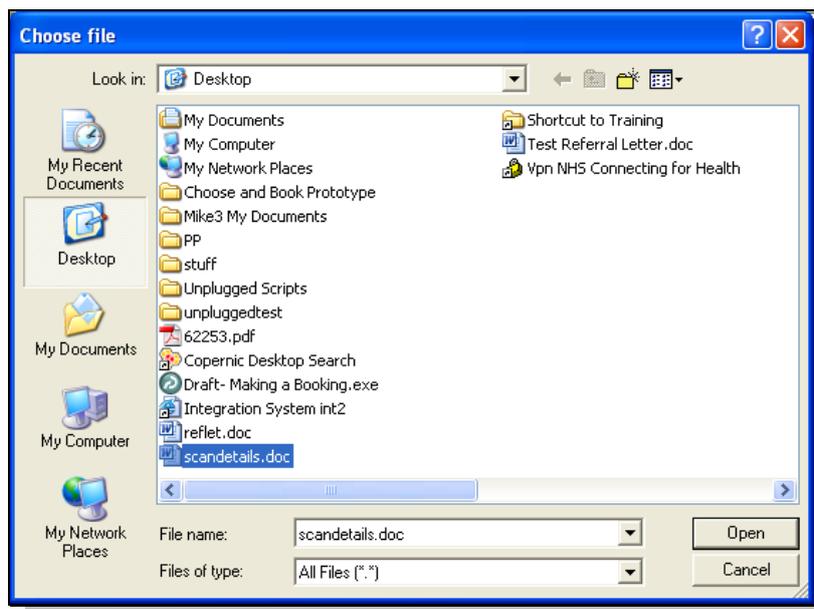
It is possible to add attachments to the Advice and Guidance request (see Appendix 3).

NOTE: This attachment should not be the referral letter. This is a request for Advice from the service. If the Advice Request is later converted into a Referral then a referral letter will be required.

Some integrated GP systems allow a referral letter to be attached prior to entering Choose and Book. This referral letter will not be visible to the service unless and until the Advice Request is converted into a Referral.

Appendix 3. To attach a file to an Advice request

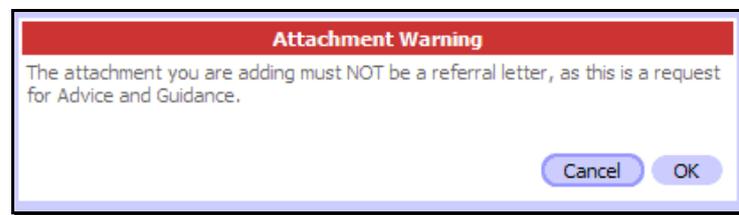
1. Click **Add Attachment**
2. From the dialog box select the file you need to attach.



3. Click **Open**.

This process may take a little time if the file is large.

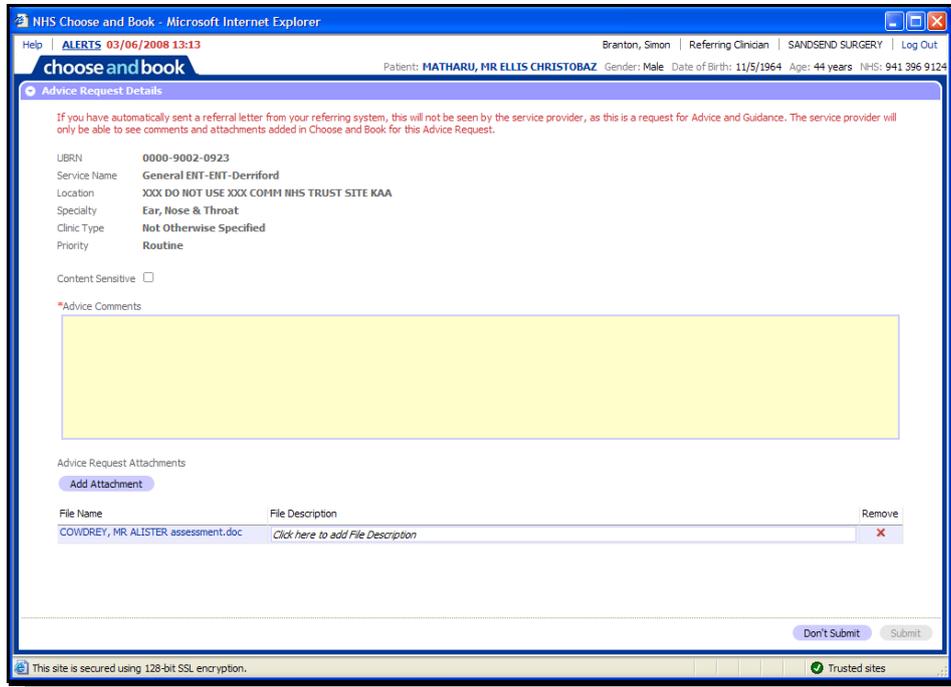
You will receive a warning the first time you add a file reminding you that the file should not be a referral letter.



You can attach the following file types:

Plain Text (.txt), HTML Text, PDF, XML Text, Rich Text (.rtf), Basic Audio, MPEG audio, PNG Image, GIF Image, JPEG Image, TIFF Image, MPEG Video, Word (.doc, .docx)

Maximum size for the attachments in total is 5Mb



The file you have added is now listed.

You can remove the file by clicking the red **X**

- Repeat the process to add additional files. Maximum size for each file is 5Mb via the web based Choose and Book. A maximum size for the attachments in total is 5Mb.
- You are able to add a "File Description" to the file name. To do this simply click on the line containing the text "*Click here to add a File Description*". You can enter up to 200 characters that will be displayed to the service when they view the advice request.
- When finished click **Submit**.

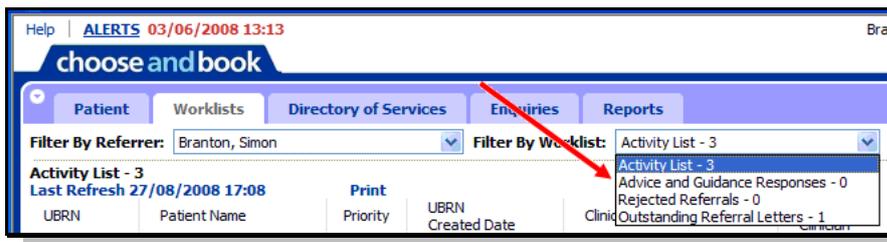
You now have the option to print off your Advice and Guidance request if you wish, by clicking on **Print** then selecting your printer from your print box.

Then Click on **Close**

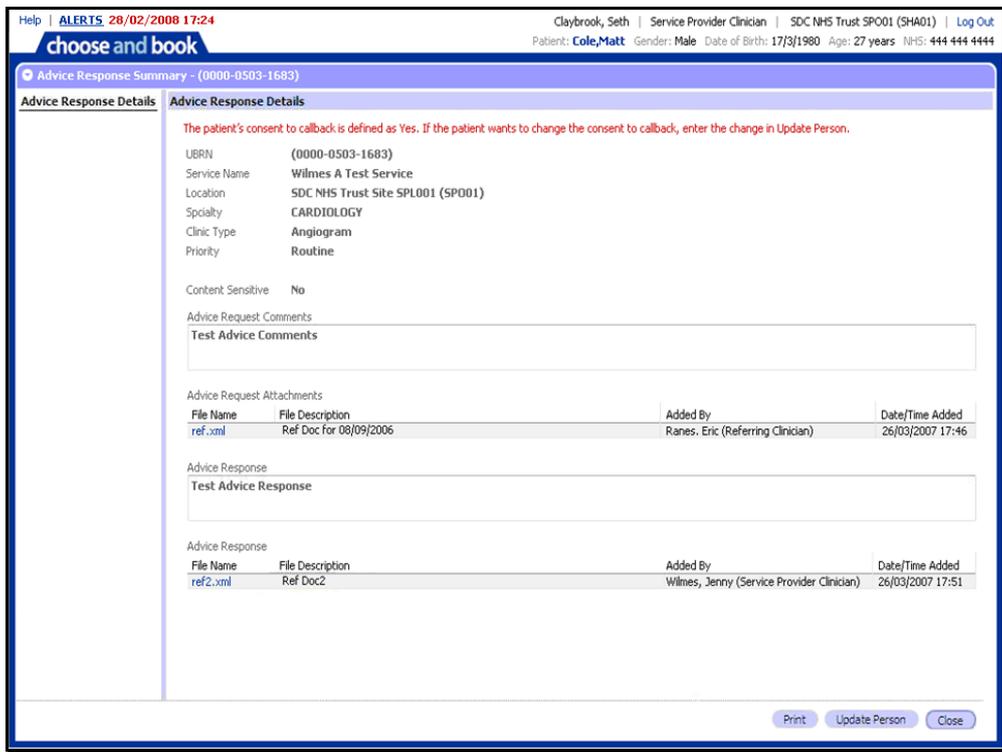
NOTE: You are not able to add notes or letters from a practice system (such as Vision or EMIS) directly into a Choose and Book Advice and Guidance request. Instead you should copy / paste from a practice system into the body of the advice request or save the additional information in a document outside of the practice system and then add it as an attachment.

Appendix 4. How to View Advice and Guidance Responses

1. On your worklist screen, click on **Advice and Guidance Responses** from the worklist filter.



2. Click the UBRN of the patient for whom you want to review a response.
3. Click Actions and select View Advice Request.



The service will write back to you in the “Advice Response” section and may, optionally, add additional attachments for you to view.

4. To view an attachment click on the file name in blue.
5. When you have finished reviewing the response click **Close**.

You can also print the advice detail with the print button. Note that this prints the advice request and response.

NOTE: The UBRN will remain in your Advice and Guidance Responses worklist for 180 days or until you remove it from your worklist.

Appendix 5. How to Convert an Advice and Guidance Response into a Booking

1. From your worklist screen, open the **Advice and Guidance Responses** worklist.
2. Click the **UBRN** of the response you wish to review and progress.
3. Click the **Actions** button and select **Update Advice Request**.
4. This now takes you to the Search screen where you can select more services if you wish, then click on **Request** or return to service selection to change the service.
5. If you are happy with the service then you can look for an appointment with the **Appointment Search** button or generate an **appointment request**.
6. Complete the appointment request process or booking process.

How to Remove an Advice and Guidance Response from your Worklist

1. From your worklist screen, open the **Advice and Guidance Responses** worklist
2. Click the **UBRN** of the response you wish to remove from your worklist.
3. Click **Actions** and select **Close Advice Request**. You now see a summary of your request and the response.
4. Click **Close Advice Request** to remove it from your worklist.

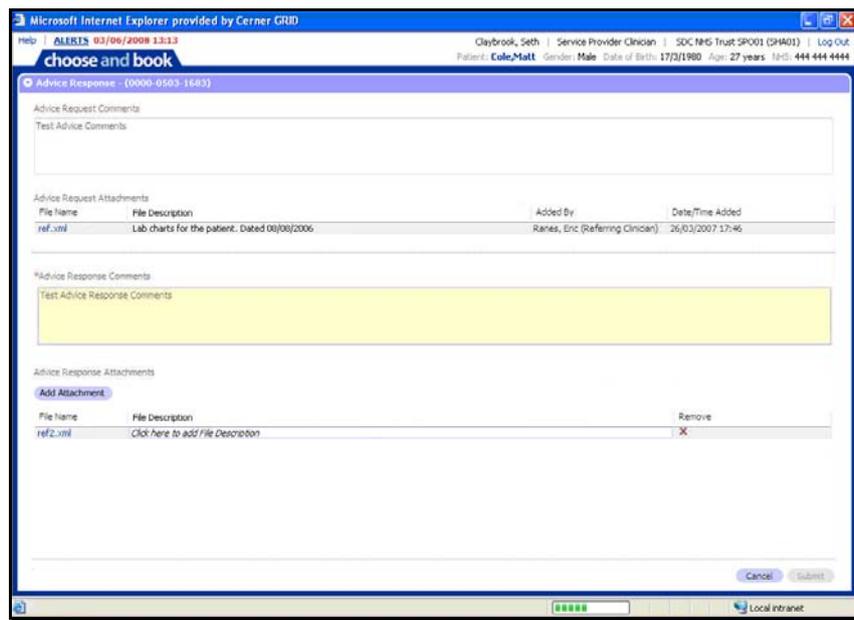
Appendix 6. How to Open and Respond to Advice and Guidance Requests

The full manual for **service provider clinician and clinical admin** can be found at www.chooseandbook.nhs.uk/staff/training/materials

1. Select the worklist Advice and Guidance Requests from the worklist filter.
2. Click on the **UBRN** of the request you wish to deal with.



The details of the request will be displayed.



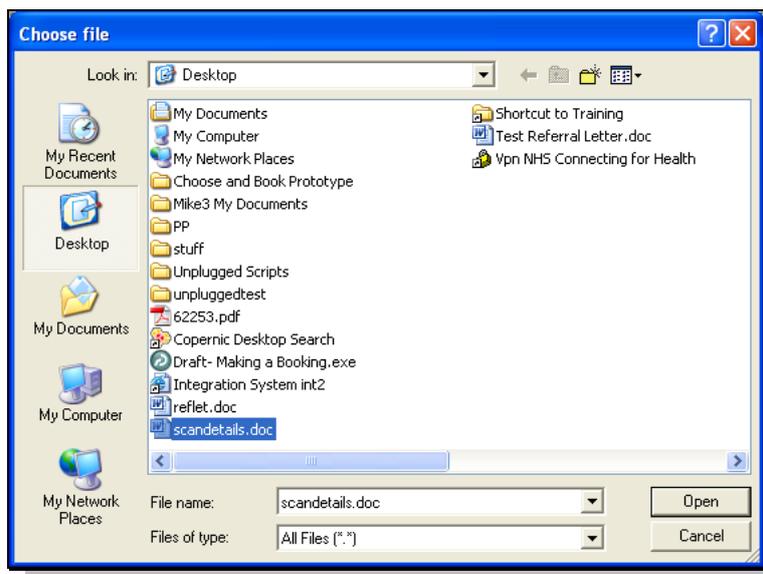
The referrer may have added some files to the request. These can be seen at the top of the screen. Each file attachment is in blue.

3. Click the blue file name to view the attachment (this is the same as a referral letter).
4. Type in your response, into the **Advice Response Comments** box.

It is possible for you to attach files in the response back to the referrer.

Appendix 7. To add an attachment to an advice Response

1. Click Add Attachment.
2. From the dialog box select the file you wish to attach.



3. Click **Open**. (This process may take a little time if the file is large.)

The file you have added is now listed.

You can remove the file by clicking the red **X**.

4. Repeat the process to add additional files.
5. You are able to add a file description to the file. To do this simply click the text *“Click here to add a file description”*

File Name	File Description	Remove
Attachment2.doc	Click here to add File Description	X

You may add up to 200 characters for the description. This text will be displayed to any user viewing the attachment.

6. When finished click **Submit**.

You can attach the following file types:

Plain Text (.txt), HTML Text, PDF, XML Text, Rich Text (.rtf), Basic Audio, MPEG audio, PNG Image, GIF Image, JPEG Image, TIFF Image, MPEG Video, Word (.doc, .docx)

Maximum size for the attachments in total is 5Mb

7. You now have the option to print off your Advice and Guidance request if you wish by clicking **Print** then selecting your printer from your print box.
8. Click **Close**.
You are then returned to the home page.