

# Reducing Onward Referral Requests



## Background

Onward referrals are one of the four key recommendations set out by NHS England to improve the primary secondary interface as part of improving access to primary care. Reducing onward referral requests sent to general practice not only improves efficiency for the system but also the patient. Improvement in this area would improve patient experience, risk of delay and errors and inefficiencies. Reports via the LMC show this in an ongoing problem.



## Aim & Stakeholders

We will reduce the number of onward referral requests sent to GPs in the Vale of York, Ryedale and Scarborough area by secondary care clinicians working in York and Scarborough Teaching Hospitals NHS Foundation Trust by 80% by 1st Jun 2025, to improve patient experience, reduce referral delays and reduce inefficiency in the onward referral process . Our stakeholders are General Practice and Hospital staff working in both clinical and management roles, with ICB staff supporting the delivery plan for recovering access to primary care.



## Measurement

As part of our measurements, we have undertaken a GP survey and secondary care survey. We plan on re-surveying both groups once improvement ideas have been put in place.

Project developed through the NHS Confederation's primary and secondary care interface improvement programme.



## Driver Diagram

Primary Drivers	Secondary Drivers	Change Ideas
Education and training	Training and education to consultants New staff induction – juniors and seniors	New starter induction process Letter to consultants regarding onward referrals position. Initial comms to consultants re onward referral expectations Guidance for secondary care to help improve wording of letters/communication with patients regarding unrelated issues
Technology	Feedback mechanism	Clear information on pathways currently RSS website eg 2ww A mechanism where ongoing requests sent back to GP can be flagged and then specific departments targeted? How would this feedback be seen?
Communication	Referral process Inappropriate referral feedback	Is there a mechanism for referrals from discharge summary and from outpatient clinic? Does this need looking at to make this possible? Are consultants aware of referral criteria? Look at IT systems to allow onward referrals Set up of process where inappropriate referrals are fed back to centralised area to monitor



## PDSA cycles/testing

- Guidance on onward referral.
- Outpatient flow chart poster of how to refer.
- Ensuring 2ww criteria easily accessible (done but needs communicating to secondary care).
- Feedback system e.g. email address to collate inappropriate onward referral requests for review/action.
- Ensure Hospital IT system can function for onward referrals.
- Education sessions e.g. as part of Hospital induction.
- Use feedback data to target specific departments and 'hot-spots' with discussion/education/support.
- Core improvement team to sustain the programme of work post-Confed facilitation.



## Intended/outcomes

### Achieved so far:

- Raised awareness of issue with stakeholders.
- Started to measure issues rather than anecdote.
- Initial comms/education.

### Intend to achieve:

- Reduce inefficiencies and improve patient experience.



## General reflections

- Engagement with doctors in secondary care.
- Complexity of some onward referrals to external organisations.
- Changing mindsets from commissioning instructions in the past.
- Making IT effective for the user and the path of least resistance.
- Improvement team needed to sustain the programme of work post Confed facilitation.
- Value of reporting into our Primary Secondary Care Interface Group which meets monthly, with Hospital, GP and ICB input.
- Lots of opportunities to share/spread learning around improvement methodologies and develop a continuous improvement culture.



## Next & sustainability

The four key NHSE recommendations are part of our existing Primary Secondary Care Interface Group work and will be supported/sustained through that programme. The group will also look for further opportunities to work collaboratively on improvement projects.