

Electronic Referral system Emergency in Neurosurgery

Issue Date	Review Date	Version
May 2020	May 2025	1

Purpose

This document sets out the process for all clinicians to make an emergency referral to the acute neurosurgery service at University Hospitals NHS Foundation Trust (UHP) using the electronic referral system Referapatient[®].

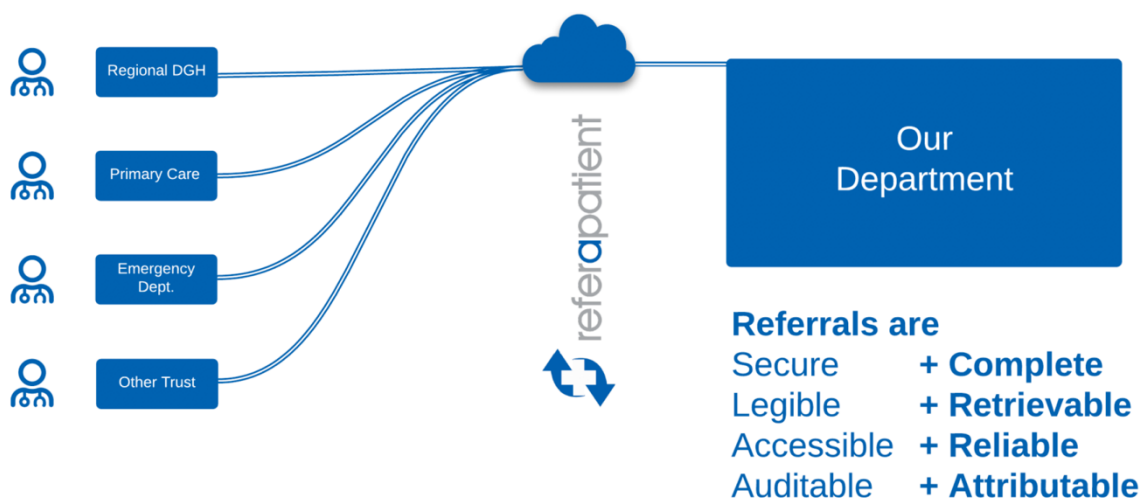
Who should read this document?

- All clinical staff who refer to Neurosurgery service
- All Administration staff within the service line
- General Practitioners
- External users who refer to the service
- Other external healthcare providers
- Commissioning Groups

Key Messages

- Traditional phone call between a referring doctor and a specialist where a few words may be scribbled in the notes has become increasingly insufficient.
- Increasing litigation and defensive medical practice is partly responsible for the huge increase in referrals and advice sought
- *referapatient* ensures that all referrals and responses are securely documented and a single platform exists to ensure clear communication between doctors.
- Referrals are complete, legible, retrievable, accessible, reliable, auditable and attributable.
- *referapatient* is currently used by over 150 NHS Hospitals and 120 Clinical Commissioning Groups across 12 specialties

A universally accessible single source of truth



Screenshot

- Referrers can complete an online referral from any device regardless of location in just a few minutes
- Access to the service requires nhs.net or NHS Trust email account
- No waiting for a bleep to be answered saving referrers time
- Detailed, written and attributable responses within minutes that can be printed and placed in patient notes
- SMS, telephone and email alerts received by referrers when response available
- Effortless handover between shifts and different teams
- Fully NHS-approved Information Governance and Data Security compliance

Please see links below for more information:

<https://www.referapatient.org/refer-a-patient>

<https://www.bloomsburyhealth.org/referapatient>

Core accountabilities	
Owner	Neurosurgery Support Manager
Review	Neurosurgery Governance Meeting
Ratification	Clinical Director Neurosurgery
Dissemination (Raising Awareness)	Neurosurgery Service line management team
Compliance	Neurosurgery Service line management team

- Links to other policies and procedures**
- Data Protection Act 2018
 - General Data Protection Regulation (GDPR)
 - Information Governance Policy
 - Subject Access Request (SAR) policy
 - APNs (Administrative Procedure Notes)

Version History

1	Initial document
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The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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Standard Operating Procedure (SOP)

Electronic Referral system (Urgent and Emergency) Neurosurgery

1 Introduction

University Hospitals Plymouth NHS Trust provides the specialist neurosurgery service for 1.8 million adults in its geographical region. Emergency and urgent care constitutes approximately 50% of the neurosurgical unit's caseload and there are around 4000 urgent referrals to our service each year. The increase in neurosurgical referrals and handover of patients means the current system of referral by phone call is no longer as effective or safe as necessary. Feedback indicates that communication, documentation and access to the on-call registrar can all be improved. This new system will optimise our service to our referrers, regional and local by ensuring speed of access, accurate information transfer, electronic recording and tracking of all neurosurgical referrals.

In line with most other UK neurosurgical units and as mandated by the GIRFT programme, the South West Neurosurgical Centre at University Hospitals Plymouth NHS Trust (Derriford Hospital) switched to an online referral system for emergency neurosurgical referrals from Monday 18th March 2019.

The system is to be used for all emergency and urgent referrals to the neurosurgical service from both within UHP and from external organisations (acute NHS Trusts and General Practice). This SOP applies to all clinicians making referrals to neurosurgery and to the neurosurgery service line delivering the service.

2 Definitions

Referrer – any clinician seeking advice or requesting neurosurgical input

Specialist – the neurosurgical team member responsible for providing advice or neurosurgical input

Platform provider – Bloomsbury Health Ltd

3 Regulatory Background

- Data Protection Act 2018
- General Data Protection Regulation (GDPR)
- Common Law Duty of Confidence
- Confidentiality Policy
- Data Security and Protection Toolkit
- Electronic health records
- Information Governance
- IT security (DPIA)

- Patient access policy
- The Public Records Act 1958
- The Records Management Code of Practice for Health and Social Care 2016
- NHS improvement (GIRFT) Getting It Right First Time
- Directory of service – Clinical Commissioning Group
<https://www.england.nhs.uk/ccg-directory/>

4 Key Duties

1. Referrers are to enter the clinical details of the referral via the secure website www.referapatient.org
2. Specialists are to respond in a timely manner to all electronic referrals and messages, within the constraints of prioritising with other clinical demands.
3. Specialists are to be available for immediate telephone advice for acute life-threatening situations and the receiving specialist will complete the online referral.
4. Additional telephone discussion remains available for all cases when necessary, the content of which is to be documented on the electronic record by the Specialist.
5. Referrers are responsible for handing-over (via the online portal) to a colleague at the end of their shift
6. When time-critical advice is provided, the Specialist is responsible for ensuring this has been received by the Referrer or a member of the clinical team responsible for the patient (via the referTrak® function or by telephone confirmation)
7. The Specialist is to be available, within the constraints of clinical demands, to provide telephone assistance to Referrers unfamiliar with the system and having difficulty accessing the service.
8. The platform provider (Bloomsbury Health) is responsible for maintaining the service and providing 24 hour technical support to referrers and specialists via their instant messaging technical support helpdesk.
9. The Information asset administrator (IAA) is responsible for maintaining the unit's referapatient registrations for specialists and their support staff; dealing with data sharing requests; assisting with complaints concerning data protection breaches.

1. Making a referral

- 1.1. Using a modern desktop browser (Chrome recommended) or smart phone, Referrer visits www.referapatient.org and selects New Referral, following step-by-step instructions:

referapatient

How it works | New Referral | Quick Message | Handover | Track My Referral

Which Hospital or Service Provider would you like to send a referral to?

Derriford Hospital, University Hospitals Plymouth NHS Trust

And to which specialty or on which pathway would you like to send your referral?

Type here

neuros

Neurosurgery

This referral form should be used if you wish to make an urgent/emergency referral or if you want urgent neurosurgical advice. If your requirements are not urgent then please send a referral letter to our department in the traditional way.

To make a referral you will require the following:

- 1) Your patient's details including 10-digit NHS number
- 2) A Trust or nhs.net email address
- 3) The referring Consultant's Trust or nhs.net email address

If your referral is an emergency then please also call 01752 202082 and ask to speak to our neurosurgical registrar on-call (Bleep 1009).

If your referral is urgent, and you have not had a response after a reasonable amount of time, then please also call this number. Regardless of the level of urgency, if you feel that you need to discuss the referral in detail via a telephone conversation, then please feel free to do this on the above numbers.

referapatient® works best when you use a modern browser such as Google Chrome or Mozilla Firefox.

Click here to continue

- 1.1. Referrer completes demographic and clinical information following the diagnosis-specific algorithm, NB Depending on your computer screen resolution you may need to zoom out to get the best view of all the fields. Use Ctrl – and Ctrl+ to adjust the zoom.

1.2.

- Referrers triage call as
 - **Emergency** – life threatening condition requiring immediate neurosurgical advice or intervention
 - **Urgent** – requires urgent neurosurgical advice or intervention
 - **Non-urgent** – routine and non-time critical problems
- Starred fields are mandatory

- c Non-starred fields should be completed if known/relevant
- d Type or dictate entries on smart phone
- e Copy and paste radiology reports and upload screenshots, photographs or documents if appropriate
- f Enter details of clinician making referral
 - Name / grade
 - Bleep or telephone number in case the Specialist needs to contact them
 - Personal mobile number [NB This is for the purpose of receiving alerts only and **IS NOT** visible to the Specialist or shared with anyone else. Referrers who do not wish to enter their number can enter 00000000000. Please be advised that if you do not enter a mobile number you will not receive alerts but you will receive an email alerts and you can track the referral status
 - NHS.net email address to which the response will be sent to
- g Once all the mandatory fields are complete click the submit button. NB If the submit button is not visible ensure to scroll right to the bottom of the screen and adjust the screen zoom using Ctrl-/Ctrl+ if necessary.

The screenshot shows a web form with the following elements:

- A button labeled "Let's begin" with "press ENTER" next to it.
- Section 1: "1 → What is the patient's first name?*" with a text input field. Below it is a note: "You may not know the first name so it's OK to enter a trauma first name e.g Foxtrot".
- Section 2: "2 → Last Name*" with a text input field. Below it is a note: "You may not know the last name so it's OK to enter a trauma last name e.g Delta".
- A quote: "Please check all the information is correct before sending".
- A button labeled "Continue" with "press ENTER" next to it.
- Section 13: "13 → Working diagnosis" with a list of radio button options:
 - A Head Injury
 - B Stroke
 - C Brain tumour
 - D Chronic Subdural Haematoma
 - E Hydrocephalus
 - F Intracranial infection
 - G Post-operative problem
 - H Other
- A button labeled "Submit" with "press ENTER" next to it.

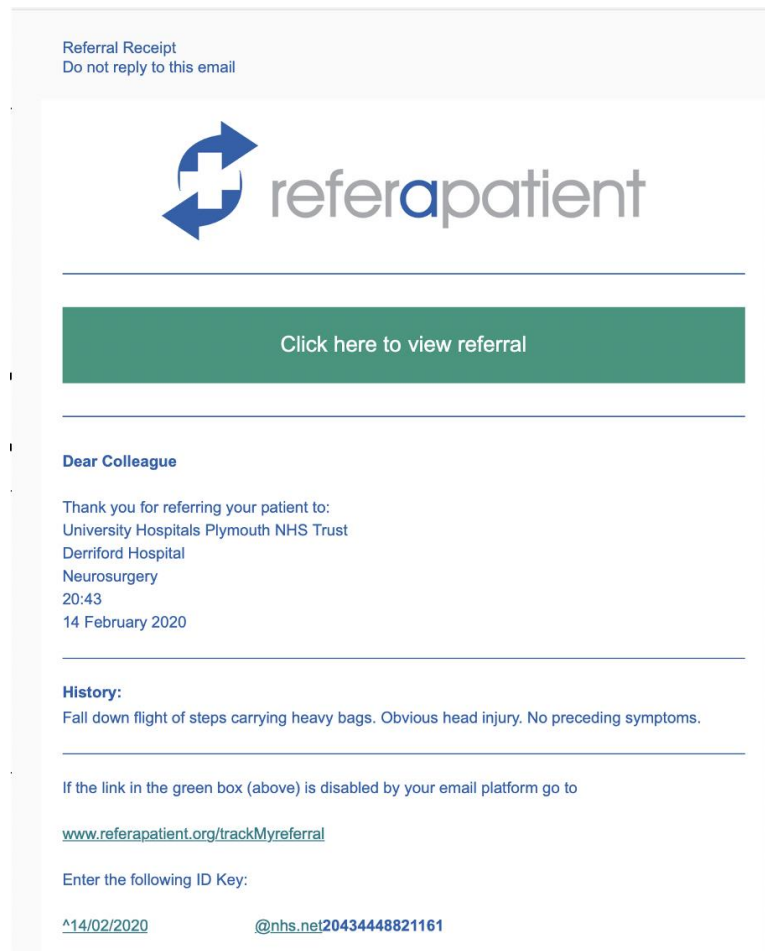
1.3. Successful submission confirmed and Referrer should make a note of the ID key in the patient notes

1.4. Referrer receives email and SMS confirmation of referral, with SMS and voice alert once referral has been read by Specialist

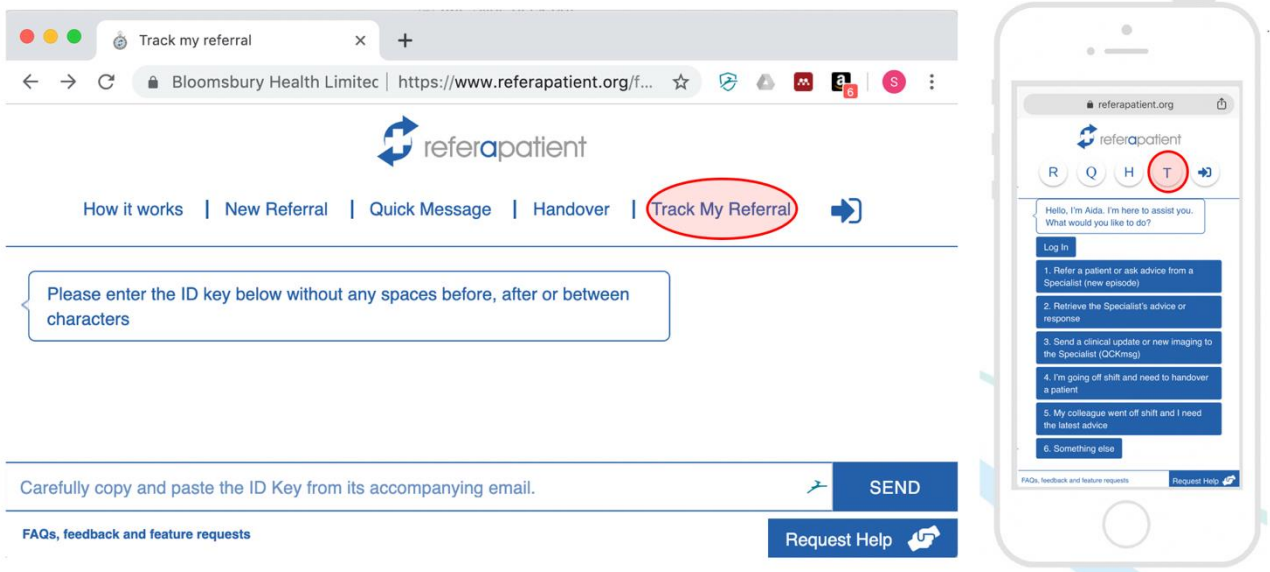
- 1.5. The Specialist receives email and SMS alert on submission of a new referral
- 1.6. For life threatening emergencies or where additional telephone conversation is deemed necessary, or when a response has not been received after a reasonable amount of time, the Referrer should then contact the Specialist via the pager system

2. Retrieving the Specialist's response from the email or with the ID Key

When the Specialist's response is submitted, the Referrer will receive notification via SMS, voice message and email. Instructions for accessing the response are in the email. Click on the green box at the top to access the referral



2.1. If your email platform has disabled hyperlinks, or you do not have the original email, visit www.referapatient.org/fetchpdf or click on **Track My Referral** on the homepage and paste the ID key into the box

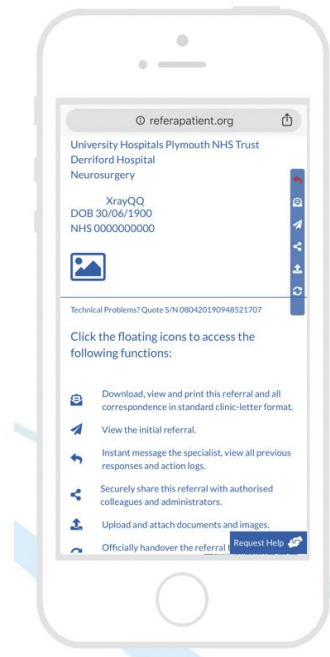
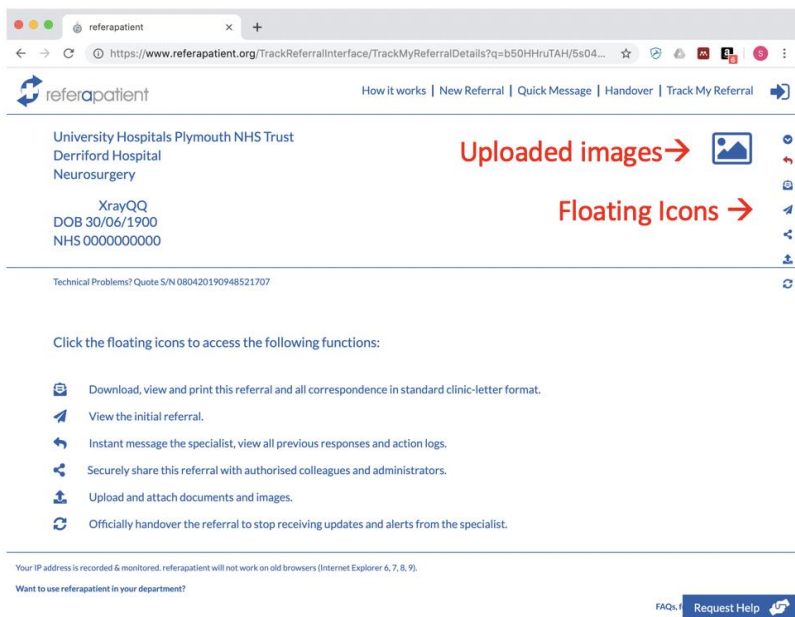


2.2. Now the Referrer can access all the options

- a Download, view & print all correspondence
- b View the initial referral
- c Instant Message the Specialist and view all previous responses
- d Securely share the referral with authorised colleagues
- e Upload and attach documents and images
- f Officially handover to stop receiving updates and alerts

NB Must click on floating icons when using on smart phone

2.3. The Specialist receives notification when the Referrer has read the response



3. Handing over care to a colleague or another team

3.1. When a Referrer goes off shift or hands over the patient's care to another team, they must officially handover on referapatient. This will stop the Referrer receiving further alerts but more importantly allow the next clinician looking after the patient to receive responses

- a This can be done through the Track My Referral portal described in section 2.2 using the ID key
- b If someone wishes to receive a handover but they do not have the original ID key, this can be done through the Handover tab on the home page. They will require the patient's hospital/NHS number and Date of Birth, the Trust and Specialty referred to, and their own NHS.net email address to do this. This clinician will now be able to access all the options described in section 2.3
- c If a referrer is going off shift and wishes to stop receiving alerts and responses but doesn't have a named clinician to handover to (e.g. patient has moved from ED to MAU) then the referrer can use the handover function, leaving the contact details unfilled. The referrer should document this in the patient's notes to ensure the next clinical team is aware. If the Specialist subsequently sends a response they will be notified that there is no nominated email address receiving that response.

Handover

Shift-based referring teams have the option to handover a referral to their successors. Successors can also handover a referral to themselves. All email and SMS alerts will be transferred to the successor.

Your Hospital or Service Provider	<input type="text" value="Derriford Hospital, University Hospitals Plymouth NHS Trust"/>
Speciality	<input type="text" value="Acute Medicine/ General Medicine"/>
Name	<input type="text" value="Dr."/> <input type="text" value="On Medical SpR"/>
Grade	<input type="text" value="ST 4-8 or SpR"/>
Bleep or telephone number	<input type="text"/>
Mobile number	<input type="text"/>
Email address	<input type="text"/>

4. Sending an instant message (QCKmsg) to the Specialist

- a An update or question can be sent to the Specialist through the Track My Referral portal described in section 2.2 using the email hyperlink or ID key
- b Anyone can send an instant message to the Specialist by selecting the QCKMsg option on the home page. They will require the patient's hospital/NHS number and Date of Birth, the Trust and Specialty referred to, and their own NHS.net email address to do this

5. Registering for an account

5.1. Referrers do not need to register for an account to use referapatient but there are several advantages

- a Quicker data entry as referrer demographics pre-filled
- b Access all your referrals from the last 10 days without the need for individual ID keys
- c Access all referrals sent from your department (e.g the Accident & Emergency Department)

5.2. To register for an account, select the login tab on the home page

6. Technical Help

6.1. Referrers unfamiliar with or having difficulties navigating the system should contact the Specialist for guidance

6.2. For technical queries or to report a fault, the technical support live chat system is available 24 hours a day via the website.

6.1 Emergency / Urgent referrals

- a) For emergency / urgent referrals to Neurosurgery, please telephone the on call Neurosurgical Registrar, see section 4 point 3 (this only applies to emergency and urgent referrals).

- b) For non-urgent referrals, please refer via referapatient or via existing paper/email referral process.

7 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by the group or committee and ratified by the Director.

Non-significant amendments to this document may be made, under delegated authority from the Service Line Director, by the nominated author. These must be ratified by the Service Line Director and should be reported, retrospectively, to the service line management group.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades that are directly affected by the proposed changes.

8 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Service Line Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

9 Monitoring and Assurance

- Referrals are monitored 24 hours a day by the Specialist
- Quality assurance of clinical advice provided by the Specialist is provided by the duty neurosurgical consultant
- Regular audit and monitoring of performance metrics, including individual Specialist's response times, is undertaken by the Service Line Management and reported through the departmental Clinical Governance organisation
- Personnel with access to the department's referrals is controlled by the Information asset administrator within the Service line management team and reviewed every 3 months and at every regular change of departmental staff.
- Complaints and concerns will be handled by the Service Line Management team.
- Regular feedback and suggestions for improvements is provided by the Specialists to the platform provider.

10 Reference Material

- Key legislation
- Department of Health regulations and guidelines
- Other Governmental regulations and guidelines
- Regulatory agency (eg HSE, NPSA, NICE) regulations and guidelines
- Professional group rules, regulations and guidelines
- Accreditation and compliance assessments
- Referapatient