**RAS: Patient Journey**

A document created to support patients in their referral process to first outpatient appointments

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**RAS** **Introduction**

The Referral Assessment Service (RAS) team manage GP referrals for patients registered with a Shropshire Medical Practice; we are supported by the Shropshire Clinical Commissioning Group (SCCG).

Once you and your GP decide that a referral is necessary, in most instances this will be directed through to RAS. Your referral will be reviewed by one of our fully trained staff to ensure all the relevant information has been received and if necessary one of the clinical nurses for triage against the CCG VBC policy. This will then be processed to the appropriate provider (please be aware delays can be caused if further information is required from your GP).

RAS enables patients to be seen in the right place first time; this may be in a GP practice setting, in a community health clinic or at a hospital. Whichever is seen as the most appropriate and meets the needs of the patient. In the past you may have expected to go to a hospital for your treatment, now there are a number of alternatives such as GP surgeries and health centres. We are always looking for new ways of providing care near to you in your local community. Specialist care however may not be available locally on occasion and RAS will inform you about the options available to you.

All referrals are created electronically by your GP practice through a national appointment booking system - the E-Referral Services system (e-Rs). This system allows a patient to choose time, date and place for their first outpatient appointment.

RAS will normally see full details of your referral including confidential information. Please advise your GP if there is any information you wish to withhold from RAS.

# Contact, Including Compliments, Concerns and Complaints

**Direct to RAS:** RAS Team

NHS Shropshire Clinical Commissioning Group

William Farr House, Mytton Oak Road, Shrewsbury, SY3 8XL

Phone: 03300 248 283

Email: rasteam@nhs.net

Opening Times: 9am to 5pm (Monday to Friday – Excluding Bank Holidays)

**SCCG Pals Team:** NHS Shropshire Clinical Commissioning Group

William Farr House, Mytton Oak Road, Shrewsbury, SY3 8XL

Phone: 01952 580407

Email: shrccg.customercare@nhs.net

Opening Times: 9am to 4pm (Monday to Friday – Excluding Bank Holidays)

**Being** **Referred**

**Why have I been referred?**

Your GP will discuss with you and, if appropriate, your carer, about why a referral is being recommended for you. It is usually because your GP wants a specialists help in deciding the best way to treat your condition. This may involve referring you for tests or investigations that cannot be carried out at you usual GP practice.

**What happens next?**
In most instances referrals are usually processed by the RAS service; however there are some exceptions (Mental Health related referrals as an example). If your GP decides that you need referring, they will confirm where your referral will go (RAS or an alternative service). A referral letter will be completed and sent to process on your behalf to the appropriate provider. If received with RAS via e-Rs, your referral will be reviewed by fully trained staff and if appropriate further clinical assessment will be sought from one of the teams’ clinical nurses (complex and funded referrals) or the referral will progress straight to the booking stage.

# How is a referral reviewed and processed?

There are three stages of referrals that RAS deal with and dependant on the requirements will depend where a referral goes and potentially how treatment is managed.

**Referral Assessment – Triage**

* A referral is reviewed in full by fully trained RAS team to ensure nothing is missing so not to delay appointments once processed
* This helps to determine which type of service is most appropriate for you based on the information your GP has included in your referral letter.
* If necessary it will be triaged by a clinical nurse who will authorise that the referral meets VBC criteria (value based commissioning policy) and can be processed further [www.shropshireccg.nhs.uk/policies-and-reports/our-policies/clinical-commissioning-policies/](http://www.shropshireccg.nhs.uk/policies-and-reports/our-policies/clinical-commissioning-policies/)

**The Booking Stage**

* When your referral reaches the booking stage, dependent on the type of referral received you may receive a telephone call to book an outpatient appointment or will receive a letter to confirm where your referral has been directed to.
* Bookings are made for the first out-patient appointment only. Any follow-up appointments are booked by the provider.

**Advice & Guidance (A&G) Referral**

* Rather than an outpatient appointment, this referral type may be more appropriate to help your GP treat you within primary care.
* The GP will send a referral requesting advice and guidance so they can be given clinical support from a consultant as to how best to treat a patient.
* This may be used for support with medications, investigations required and general information.

# Treatment and Providers

When we talk about treatment, this could include surgery, some therapy and even a period of waiting to see how your condition progresses.

**Community Services**

There are many different types of community based services operating within the Shropshire area that will help patients with many different treatments. In many instances, a patient will be referred to a community based service in the first instance and if more specialist care is needed then be referred to a secondary care provider (Hospital based).

**Secondary Care Provider (NHS, Independent or Private Hospitals)**

Secondary care providers are usually hospital based outpatient appointments, being seen by a clinical consultant with that specialism.

# Patient Choice (first out-patient appointment)

Whilst under the NHS Choice framework patients are legally entitled to a choice discussion, there are exceptions to this however due to localised policies and whether services/procedures are funded by NHS.

In England, under the NHS Constitution, patients have the right to access consultant-led, non-emergency treatment within a maximum of 18 weeks, or for the NHS to take all reasonable steps to offer a range of alternative providers if this is not possible.

**Where the choice is available, most people choose to be treated at their local hospital, but you can in fact choose to be seen at many health centres that provide the service you require. You can find details of all hospitals in the UK, including a hospitals performance and comparison of hospital facilities on the NHS Choices website**

Exceptions include emergency and urgent services, cancer, maternity and mental health services. For example, if individuals need to be seen urgently by a specialist (such as for severe chest pain) they will be sent to the local provider for that service.

You will **NOT** be able to choose if:

* A service is provided by local authorities (community), as your choice will depend or may be restricted to what is in place locally.
* Services for suspected cancer.
* Services may also be restricted to a particular level of care.
* If a service is not funded by NHS
* There are restrictions due to national health matters

The CCG recognises that sometimes referrals are made outside the areas that are not subject to patient choice. To maximise convenience for patients and investment in local services, the CCG actively promotes local referrals wherever a clinically equivalent service exists.

If you have already discussed where you want to be seen with your GP, the GP referral letter will have made that clear.  If not, we will talk to you about the options available.

**Where choice can be given (most secondary care services):** RAS will call you to offer choice. If we are unable to contact you by telephone we will send you a letter requesting you call us. Where choice is available RAS allows patients to make their first out-patient appointment at a time, date and place that suits them.

**Where choice is not available**: You will receive a letter advising where your referral has been sent.

# Referral Pathway – GP, RAS, Providers

# RAS Frequently Asked Questions (FAQ)

# My doctor has asked me to call RAS - Why?

The main reasons for you to contact the service are:

* Your doctor has decided you need a referral for treatment at another location under a specialist.
* Your doctor has suggested that you may qualify for travel assistance to your appointment and RAS can offer advice on who to contact.

# What/Who is RAS?

* RAS are an NHS funded service who processes all requests for further treatment for patients registered to a Shropshire medical practice.
* When your GP believes that you may benefit from a referral for treatment at another location or a higher level of care, they will complete a referral and send it through to RAS.
* As part of this process your referral will be triaged to ensure we have as much information as possible to ensure your referral is directed to the most appropriate services.

# Why do I have to confirm my identity as the patient when I contact the service?

* The Data Protection Act mandates that all companies must take reasonable steps to ensure they have checked and confirmed the identity of the person calling before discussing any personal information with the caller.
* The reason you will be asked to verify your details is to ensure that no-one other than you or your recorded nominated representatives has access to any information about your health and medical appointments.
* As a result of this RAS will not be able to speak to a representative without your permission unless written consent is included within your GP’s referral.

# How can I contact RAS?

* Telephone: 03300 248 283
* Email: myreferral@nhs.net
* The service is currently open 9am to 5pm Monday to Friday (Excluding bank holidays)

# What are the best times to call the service?

* Calls are normally answered in less than a minute. The service is usually busiest on Mondays so you are likely to wait a little longer if calling then.

# Why do I have to call to book an appointment? Why can’t I just be sent one?

* Since the publication of the NHS Choice Framework, NHS organisations are required to encourage patients to be more involved in decisions about their own care and treatment.
* Under this framework, for particular types of appointments, you are now legally entitled to have a choice discussion about when and where your care takes place.

# I would like to be seen by a particular clinic/consultant, how can I go about this?

**GP Advice**

* You're entitled to ask for a referral for specialist treatment on the NHS, but whether you'll get the referral depends on what your GP feels is clinically necessary in your case. If you ask your GP to refer you to a specialist, they'll probably suggest that you first try various tests or treatment options to see whether your condition improves.

**NHS Referral**

* A referral would still need to be generated by your medical practice and sent through to RAS, this is because all your medical records are held by that practice. Generally, you cannot self-refer to a specialist within the NHS, except when accessing sexual health clinics or A&E treatment.

**Private Care**

* If you want to see a private specialist, you're still advised to get a letter of referral from your GP.

# Why wasn’t I offered a choice of hospitals?

Whilst under the NHS Choice framework you are legally entitled to a choice discussion, there are exceptions to this.

You will not be able to choose if:

* A service is provided by local authorities (community), as your choice will depend or may be restricted to what is in place locally.
* Services for suspected cancer.
* Services may also be restricted to a particular level of care.

If you feel that you should have been offered a choice but were not offered one please contact RAS to discuss this further.

# My GP does not have my up to date details. Can you change them?

* You will need to update your details with your GP.
* RAS can update initial referral details in our own systems, but this will not transfer back to your GP systems.
* Ensuring your details are up to date with your GP will ensure RAS are able to contact you more quickly.

# My referral had to be deferred. What does that mean?

* If your referral has been deferred to a provider, this means at the point processing your referral, the provider had no appointment slots showing on the shared booking system.
* Deferring to the provider means that the referral was sent electronically to the hospital’s waiting list.
* Once an appointment becomes available, the hospital appointments team or appropriate departments will either telephone you to book an appointment or will send you an appointment through the post.

# What if I need to change or cancel my appointment?

* You can call RAS directly on **03300 248283** and we will happily rearrange your appointment for you.
* You can email in and a member of the team will respond via email or give you a call if you request it - myreferral@nhs.net
* Your appointment confirmation letter includes your Unique Booking Reference Number (UBRN) and password. Using these, you can go online at **www.nhs.uk/referrals**.
* Alternatively, you can call the national telephone appointment line on **0345 088 888**

# I haven’t heard from the hospital about my appointment yet. What should I do?

* Please contact RAS so we can review the referral pathway details and ensure everything has gone through for you and so we can offer further advice.

# What are waiting times for appointments?

RAS do have access to most waiting list information for local providers and will be happy to advise you about information we are aware of.

Ultimately, contacting providers directly will ensure you are getting the most accurate up to date information.

If you haven’t heard from the hospital/provider within the below guidelines:

**Routine priority appointments**

* Contact within 12 weeks

**Urgent priority appointments**

* Contact within 8 weeks

**Suspected Cancer referrals**

* Contact within 10 days

# I haven’t been provided with an appointment yet, how long can I be expected to wait for a date?

All NHS Providers have to adhere to nationally agreed referral to treatment guidance. For all routine appointments you should be seen and your treatment should begin within 18 weeks of being referred to the service.

**However, your right to an 18-week waiting time does not apply if:**

* You choose to wait longer due to other commitments.
* Delaying the start of your treatment is in your best clinical interests – for example, where stopping smoking or losing weight is likely to improve the outcome of the treatment.
* It is clinically appropriate for your condition to be actively monitored in primary care without clinical intervention or diagnostic procedures at that stage.
* You fail to attend an appointment that you had chosen from a set of reasonable options.
* The treatment you were referred for is no longer necessary.

For suspected cancer referrals, you should expect to be contacted/ seen within two weeks of your referral being received by the hospital.

# What do I do if I find I have not been referred?

* Please contact your GP in the first instance so they can check records to see that your referral has been created and sent to the appropriate service.
* In most instances your referral will be directed to RAS, however there are some referral pathways that would not come through our service (for example mental health).
* By all means, feel free to contact RAS and we will check our systems and offer advice if available.

# I have lost my letter and don’t have my reference number to book my appointment.

* RAS can locate your referral without your referral reference number

# I have multiple referrals for different specialties. Can I process them all at once?

* If you have multiple appointments these can all be booked during one contact with the service. Please make the adviser aware when you call

# The hospital/service is saying that they haven’t received the referral from you. What should I do?

* Please call RAS and we’ll be able to help. Every referral that is processed through RAS team is electronically tracked from the moment the GP initiates the referral.

# What should I do before my appointment?

* Check where your appointment is and what time
* Call RAS on 03300 248283 if you have not received a confirmation call/letter with details and we can check and advise further
* If you need to cancel or re-book your appointment, contact RAS so we can offer the time slot to another patient
* Take a list of all your current medications with you

# I have had investigations completed and need to get my results, who do I contact?

* At your appointment the team should hopefully give you instructions as to who will be provided with the results and how you can access this information.
* In some instances specialists may ask you to contact them directly, however in most instances results will go directly back to your GP. Please check with your GP unless you have been advised otherwise.

# What if I need a follow up appointment?

* The specialist will discuss with you whether you should attend hospital for ongoing follow-up care or whether you should be discharged back to your GP.
* If the specialist thinks you do need to be seen again, the hospital will give you another appointment or tell you when to expect this.
* If you do not hear anything, please contact the specialist’s office, rather than your GP surgery.

# What if I need a Fit Note (Previously known as a Sick Note)?

* If you need to be certified as unfit for work your GP should initially provide you with this.
* If you need a Fit Note following hospital treatment, the hospital/specialist should provide this to you as part of your discharge package (speak to your GP if this has not been discussed/provided).

# What happens if I need new medicines?

The specialist might suggest prescribing new medicines for you or might want to make changes to the medicines that you are already taking.

The specialist is responsible for:

* Giving you the first prescription for any new medicine that you need to start taking straightaway; and
* Giving you enough medicine to last at least the first seven days, unless you need to take the medicine for a shorter time. After this, you will need to contact your GP surgery if another prescription is required.

It is important that you understand whether you need to start any new medicines, or whether the specialist has changed the medicines you already take, so ask the specialist if you are not sure. In some cases, your GP will not be able to prescribe certain medicines and you will need to continue to receive these from the hospital. You will be told about this at your appointment.

# What does RAS do with my data?

* Your full patient record (including the information shared with RAS) will only be seen by healthcare professionals who are directly involved in your care or treatment.
* There are strict controls on how anyone else can access patient information. The purpose must be approved before anyone can use data and they are only given access to the amount of data necessary.
* Anonymised data is used by NHS providers and commissioners to monitor trends and activity.

# How does RAS keep my data safe?

* It is essential that any NHS organisation keeps all patient data safe and secure. This is to protect your confidential information. RAS does this in in the follow main ways:
* By using an independent review process to make sure that the reason for using your data is essential to your care.
* Ensuring the service is strict about when and how data is transferred.
* Implementing a robust high level IT security system.

# Can I opt out of my data being used for any other reason than to arrange my care?

* Yes you can. This is called a Type 1 Opt out.
* For more information please visit **www.nhs.uk/your-nhs-data-matters/**