Electronic Referral Project

March 2018

GM Electronic Referral System

This is now being rolled out over the next few weeks. You will receive an email with logon details and the portal’s web address. You will be able to add further users yourself and these can have differing access rights. Practitioners (optometrists, DOs and CLOs) can sign off a referral, but reception staff can only enter demographics. Users can be given administration rights which allows them to add users.

The system means that fax is no longer required and allows providers remove fax machines in advance of the NHS target withdrawal date.

Once operational, feedback on the module should be addressed to info@gmlocs.co.uk

How does it work in the current version?

- Any routine referral you make will go to the GP or booking centre as now, but it will be sent using the Greater Manchester document electronic transfer service known as DocMan.

- Wet AMD referrals will be sent to the provider from a centralised NHS email address (you may wish to phone as now to confirm receipt).

- Urgent referrals should be entered into the system and your local protocol followed. If this is to phone first, then do so, and also print the referral for the patient to take a copy. The referral will also be sent to the eye casualty email address. If the current protocol is to fax but not phone, then the system will email it instead. All providers have set up appropriate NHS Mail addresses for this system.
What’s coming in future versions?

- Already identified issues will be fixed (see later)
- The system will be integrated with NHS number look up (2 or 3 months away). This adds the NHS number and should eliminate duplicate patients and incorrect spelling. This system is known as mini-PDS (patient demographic service, or the "NHS spine"). This will only return one match, so your search has to be exact. The full PDS lookup will return multiple options, but requires an NHS connection and an NHS Smart card, both of which we are leaving on one side for now.
- The system will be integrated with the NHS eReferral system (~6m away). When this happens, the routine referrals will cease being sent to the GP by DocMan and will switch to direct referral to the provider options offered. This may be a list of local providers, or it may be a booking centre, depending on local commissioning arrangements.

Points to note

The system works, but some bugs will undoubtedly come to light with increased use. We don’t wish to delay launch any further, but there is a known issue at the time of launch and a couple of quirks to be aware of:

1. The planned document upload facility is not yet available. This would be adding things like visual field plots. Evidence from the Optomanager referral module in HMR is that additional documents are not uploaded much at all, so there seems no reason to delay. The estimated date for this to be added is the end of May. In the meantime, please just describe the VF plot and give a copy to the patient to take to their hospital appointment.

2. The refraction is a mandatory entry for certain clinic types - sph, cyl and axis. The prism fields are not mandatory. You can tab from one field to the next. If the Rx consists of a sph only, then just tab to cyl and axis and enter a zero, or better still, a dash (hyphen). This removes the mandatory requirement and selecting ‘not possible’ removes it altogether.
3. Certain other fields are mandatory, and these differ depending on the clinic type. This follows the advice from the national electronic data set. All mandatory fields are marked with a red Asterix. You may find that you are referring for a problem in one eye and yet a descriptive field is mandatory for both. In that case, just put ‘nil’ or ‘N/A’ in the field that does not apply.

4. When adding users in more than one practice; User A is created in Practice 1 and User A needs to be added to Practice 2. Practice 2 Creates a new user using User A’s credentials. The system alerts that User A already exists on the system and asks if they want to continue. When Yes is selected, User A receives a system generated email notifying them that they can now access Practice 2 and they can now select Practice 1 or Practice 2 when they log in and maintain their one Password / email from the User Management screen.

FAQs (these can also be found at http://www.gmlocs.co.uk/GMLOCs/ERS-FAQ)

- Are some fields mandatory?
  - Yes, different fields become mandatory for different clinic types. However, there is an option to indicate the information is not available.

- Can we print the referral for our records?
  - Yes

- Is there a notification that the referral has been received?
  - For routine referrals, the reports section will offer a DocMan report showing the status of docs passed to the GP. For NHSMail referrals there is no notification, so we advise phoning to check receipt as for fax, although Cegedim (the IT provider) do monitor the status of emails.

- Do we get result letters back from the HES following referral?
  - No, not at present

- Does the system work for patients with a GM outside Greater Manchester?
  - No, the system only works for patients with a GP in GM.

- Is there any choice of WetAMD provider
  - The choice will be the same as you have in your area now and is determined by the locally commissioned pathway.

- Do DOs and CLOs have access to make referrals?
  - Yes, they can have full access
• **How does a practice manage occasional locums?**
  o The locum can be added on the day. You may wish to assign administrator rights to more than one person to ensure there is always admin cover to add users.

• **Does the practice administrator determine an individual’s access rights?**
  ▪ Yes

• **How do logons work?**
  o Each individual has their own logon. For practitioners who work in more than one practices, they will select their location after logging in.

• **Can you view a previous referral, even if it was another practice?**
  o Yes, so long as the patient has consented to share information.

If you have any queries, please contact one of us

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