

# NHS e-Referral Service

Paper switch off  
implementation pack



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# Standard Contract for 2018/19

The [Standard Contract for 2018/19](#) requires the full use of the NHS e-Referral Service for all consultant led first outpatient appointments

From **1 October 2018**, providers will no longer be paid for activity which results from referrals made other than through the NHS e-Referral Service.

The Paper Switch Off programme (PSO) has been launched to provide support for the health communities in readiness for the contract change.

There are usually two stages to a PSO project:

Stage 1 – increase your use of NHS e-RS to a level where it is feasible to implement a paper referral returns process

Stage 2 – stop using and accepting paper referrals in your health economy, for all GP to first consultant OP appointments

Some PSO projects however are designed to “switch off” paper through a staged approach, certain specialties at a time.

# Paper Switch Off pack

This is a step by step guide intended to support the delivery of Paper Switch Off (PSO) in a local health community.

It details the recommended approach to the project, from establishing project governance and set-up, to business process change, along with the associated guidance, templates, or sample documents from PSO pioneer trusts gathered to date. Items marked with \* should be considered as essential.

It may be possible to do some of the activities at the same time or in a different order to suit your local project requirements. It may also not be necessary to carry out each activity depending upon your current starting point and level of NHS e-Referral Service (e-RS) utilisation.

If you require further information on any of these projects, then please contact your relevant NHS Digital Implementation Manager (contact details at the end of this pack.) They will then progress your request.

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# Overview of Project Stages

## 1. Engagement

Overview of the Programme, Contractual Requirements, Outline Provider Requirements, Exec buy-in and other stakeholders inclusive of CCG, LMC and GP leads, CSU

## 2. Project Kick Off

Business Intelligence Pack, Project Plan Templates, Business Transformation, Governance Model, Support, to include all stakeholders, especially CCGs

## 3. Planning and Discovery

Determining local baseline, resourcing needs, detailed diagnostic work and planning

## 4. Delivery

Delivery the change, Communications (both internal and external), Training Milestones, Monitoring progress, Barriers / Risks & Issues  
Approaching Paper Switch Off

## 5. Business As Usual

Paper Switch Off in place, Ongoing monitoring, Benefits, Lessons Learned

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# Stage 1: Engagement

To deliver a successful PSO project, the following stakeholders **MUST** be engaged with:

- Provider Trusts and CCG to lead the PSO project
- LMC and GP leads, CSU to provide advice

The following documents and webpages will assist you

- e-RS overall benefits for [referrers](#), [providers](#) and [commissioners](#)
- Benefits [case studies](#) by stakeholder groups, including [patient case study](#)
- Review [e-RS FAQ's](#) for background and awareness
- Use the end to end [e-RS video](#)
- Sample [presentation for LMC](#)

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# Stage 2: Project kick-off

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- Review [PSO pioneer trust lessons learnt](#) report
- Ensure executive level buy-in and ideally appointed as project SRO
- Review and confirm your Paper Switch Off go-live date with all stakeholders including NHS Digital IBC Lead and NHS England Regional Implementation Manager
- Agree your project governance
  - [Sample kick-off meeting agenda](#)
  - [Template TOR project board](#) \* [sample agenda](#)
  - [Template TOR steering group](#) [sample TOR](#)
  - [Template risks and issue log](#) \* [sample R&I log](#)
  - [Template highlight report](#) [sample A](#) and [sample B](#)

# Stage 2: Project kick-off

- Develop a PID/project brief
  - [PID template A](#)                      [PID template B](#)                      [PID sample](#)
- Develop your local project and action plan.  
**Note:** On the template tabs, Type A is recommended for providers over 80% utilisation, Type B for providers with less than 40% utilisation
  - [Project plan template](#)
  - [Action plan \(provider focus\) template](#)
  - [Action plan \(primary care focus\) template](#)
  - [Sample project plan from County Durham and Darlington](#)
  - [Sample project plan from Sherwood Forrest](#)
- CCGs will need to be involved and deliver activities supporting all action plans



Decide on your PSO approach. Some projects with lower utilisation are implementing PSO specialty by specialty, whereas the ones already at higher e-RS use are tending to do PSO for all services at the same time

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## Stage 2: Project kick-off

- Business Intelligence Pack to be created by your NHS Digital Implementation and Business Change contact
  - [Sample BI Pack](#)
- Continue to review management information available locally, on the e-RS website and Power BI reports.
  - [Performance reports](#)
  - [Power BI reports](#)
- Develop local reporting approach to monitor progress and monitor paper referrals
- Agree the level of support and way of working with your NHS Digital Implementation and Business Change contact
- Identify any relevant [case studies](#) appropriate to your particular status

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# Stage 3: Planning and Discovery

- Identify gaps in your business process compared to [best practice guidance](#)
- Produce baseline of services that need to be added to e-RS to support e-RS publishing services CQUIN. Use the NHS Digital [Guidance](#)
- Identify current Appointment Slot Issue (ASI) position and agree associated actions to improve. Ensure the CCG are aware of the position as they can help with communications and GP expectations
  - [ASI guidance](#)
  - [NHS Improvement Rapid Improvement Guide - ASI](#)
  - [Polling range guidance](#)
- Agree whether e-RS Advice and Guidance services need to be implemented
  - [e-RS A&G Guidance](#)
- Identify any further internal and external stakeholders to be involved in your PSO project
- Further enhance project plan, timescales and resource requirements

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- Ensure key CCGs are fully engaged and part of the PSO project. Critical activities they are responsible for and can support are:
  - Communications with GP practices
  - Engagement with LMCs
  - Identifying and providing any training requirements (link with NHS Digital as appropriate)
  - Addressing any issues with specific GP practices
  - Ongoing monitoring and reporting of PSO, and any support necessary for specific practices not following process
  - Support the review of DOS, critical to ensuring minimum re-direction occurs
  - Technical readiness and delivery of IT infrastructure
  - Awareness of cross-border trust PSO plans and activity
  - Agreeing and implementing the payment process in line with the standard contract

# Stage 4: Delivery

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- Begin to deliver the activities detailed in your PSO project plan
- Make all services available to book on eRS.

Tips and Advice

Advice from Kings Hospital: *“Part of engaging with the clinicians was to get them to review and update the DOS and clinic templates . This way they saw how the system worked and could ensure the services they provided were accurately portrayed.”*

- [Outpatient Pathway modelling instructions](#)
  - [Example Two Week Wait mapping](#)
  - [Sample notification of 2WW going live](#)
  - e-RS Advice and Guidance services to be implemented (if agreed) - [guidance](#)
  - Formulate and agree rigorous process for managing closed/changing/new PAS clinic code
- Implement the agreed plan to reduce Appointment Slot Issues
  - Add all named clinicians to e-RS - [guidance](#)

Tips and Advice

Advice from Kings Hospital: *“We started (and continue) to ensure that all triaging clinicians had up to date smart cards and were trained on eRS”*



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- Continue to complete and review all project progress reports, delivery against key milestones, utilisation and ASI reports
- Develop a joint local communications and engagement plan between provider and CCG to provide regular update on progress to ALL stakeholders.

For example:

- Letter to be sent from Trust Exec Team/Medical Director to advise staff of the upcoming improvement work
- A section for e-Referrals to be allocated in organisation's newsletter/ comms/ Extranet
- Dissemination of updates such as new services available on e-Referrals and training



Go to the [Communications Toolkit](#) for advice and sample documentation

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GP communications are essential, and should at minimum cover:

- Liaison via CCG to LMC's advising of e-referral project PRIOR to direct communication with GP's\*.  
This is to ensure their awareness of the project, acknowledge any concerns they may have and work through queries together to ensure their support.  
It is also opportunity to seek their advice on best mode of communication with Primary Care.
- Example letters for GPs are here:  
[Bromley CCG notification of paper switch off](#)  
[Frimley specialty waves letter](#)  
[Hull and East Yorkshire Paper Rejection Proforma](#)
- Arrange to have a slot on GP communiques to provide regular updates on new services being piloted and rolled out.  
[Sample from Sandwell and West Birmingham CCG](#)  
[Yeovil - sample flyer](#)

# Stage 4: Delivery

When utilisation approaches the desired level for PSO (ie. it is feasible to implement a paper returns process), the project will enter the final PSO project stage and prepare for switching off paper.

- Complete and continue to review the [PSO readiness checklist](#)
- Review and sign off the formal date for implementing Paper Switch Off status ie. all referrals for first consultant OP appointments will not be actioned and returned to the referrer
- Agree any local list of exclusions from this PSO project if necessary, taking the standard contract guidance into account. [Sherwood exclusions here](#)
- Refine any SOPs, access policy and contingency plans and ensure sign-off. [e-RS Standard Operating Procedures sample\\*](#)
- Agree and ensure exec/clinical sign off of the process to follow for returning paper referrals\*. This is a mandatory requirements as defined in the standard contract guidance

[Sample for routine referrals](#)

[Sample for 2WW referrals](#)

[Sample paper referrals recording form/report](#)

[Sample from Warrington](#)

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# Stage 4: Delivery

- Continue to communicate the PSO switch off date to all GP practices, and support their queries
  - [Example bulletin](#)      [Example bulletin from Kings](#)
  - [Sample FAQs](#)
  - [Sample report for Clinical Exec Committee](#)
  - [Sample mail for practices](#)
  - [Sample auto e-mail reply to go to referrers](#)
- Consider, co-ordinate and deliver regional communications with trusts in the same local geographic area, sharing knowledge and your timescales for Speciality Go Lives/Full PSO via CCGs
- Ensure detailed data analysis is completed. [Guidance](#) here

Tips and Advice

Advice from Kings Hospital ; “For a while two processes will need to be followed until the paper referrals have all filtered through. There was no interim period for all paper referrals to be processed prior to paper was switched off. Appointments were booked on a ‘first come’ basis with slots being booked via eRS and paper to the next available.”

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# Health community now LIVE and operating as Paper Switch Off

# Stage 5: Business As Usual

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- Paper Switch Off status is now in place. The provider will return all paper referrals for first consultant OP appointment to the relevant GP practice
- Implement revised SOPs and ensure ongoing BAU activities carried out, eg. continual training, new services added to DOS, addressing any paper referrals that continue to be received
- Ensure the Trust, CCG and practices Business Continuity Plan is updated for PSO and is fully communicated  
[Sample e-RS Standard Operating Procedures and continuity plan](#) \*
- Subscribe to live service alert information for e-RS (plus other national systems) [here](#)
- CCGs continue to monitor progress in line with the usual contract management processes and the [Improvement and Assessment Framework](#)
- From October 2018, CCG to ensure payment for referrals made in line with the standard contract

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- Every NHS Organisation has an assigned e-RS Subject Matter Expert (SME) to support your e-RS implementation, projects and answer any specific queries. Contact [office.abc@nhs.net](mailto:office.abc@nhs.net) to find out your e-RS SME
- Each NHS England Region has been assigned a Regional Programme Manager to support Paper Switch Off. To be put in contact with the relevant lead, please email [England.electronicreferrals@nhs.net](mailto:England.electronicreferrals@nhs.net)
- For up to date news on e-RS, please [sign up to the bulletin](#)
- The [e-Referral Service roadmap](#) shows:
  - system enhancements
  - when they're being delivered
  - deadlines for the levers and incentives for using the service



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## Feedback

Please let us know if this pack is helpful in delivering your PSO project

Please share your example documents, templates and best practice

Let us know if there is anything we can do to make this pack better

Email us at [office.ibc@nhs.net](mailto:office.ibc@nhs.net)