

5<sup>th</sup> April 2020

Dear Colleagues,

*We know that each of us is struggling in our own way as COVID has taken over our lives and the lives of all those around us in a way we could not have imagined. Thank you for all you are doing to steer us through these difficult times.*

*You may well feel that a new streamlined process for referrals into providers should not be a priority right now and that getting care right for COVID patients is our immediate priority. Of course you are right but we also need to ensure that people with other health needs are not lost in the system.*

*Our providers want to continue eRS advice and guidance for as long as possible to support you in your patient care. With referrals into the Trust, we have collectively agreed that the best way to ensure we prioritise **assessment according to clinical need** is by moving to **eRS triage for all services**.*

*We are asking you to negotiate with your patients the pausing /deferring of any routine referrals for the time being, but to make all other referrals through eRS triage services where these are available. A consultant will scrutinise all these referrals and ensure we prioritise assessment of those in immediate need and put in place safe interim plans for the remainder so that we can see them as soon as possible.*

*The TIA clinic is an important exception to this; referrals should still come through ICE. We are working through other routes of referral but, if you think we have missed any referral routes, please let us know. Referral processes for acute care remain unchanged.*

*With best wishes,  
Nicola & Tamara*

### **Now for the Techie bit....**

To help support General Practice and the Trust to manage outpatient referrals during the current COVID-19 pandemic the following key operational principles are to be considered:

- ERS referrals for review will remain open with the expectation that this is **used only where clinically necessary with the focus on Fast Track (Two Week Wait) and Urgent Referrals**.
- **ERS Advice & Guidance** will continue to operate and should be used as the default instead of making a non-urgent referral.

- The Trust has changed from a directly bookable service to a **triage service** for all referrals since Monday 6<sup>th</sup> April. Routine referred patients will be held on the HHFT PAS Lists until normal operational activity resumes.
- **Fast Track and Urgent** will be processed and booked into a non face to face appointment or face to face – depending on specific pathway and clinical circumstances.
- There will be **no non-clinically urgent surgery** for the foreseeable future. Please do not refer patients that are likely to need routine surgery or procedures.
- Requests to expedite **existing referrals will only be facilitated via ERS** where clear clinical explanation of clinical deterioration is provided.
- This will be kept under review and as circumstances change this may need to be revisited
- More work is being undertaken to review ICE referrals to ensure appropriate management for all pathways.

**To support the Trust during this phase the following changes have been put in place:**

**Patients already with booked outpatient appointments**

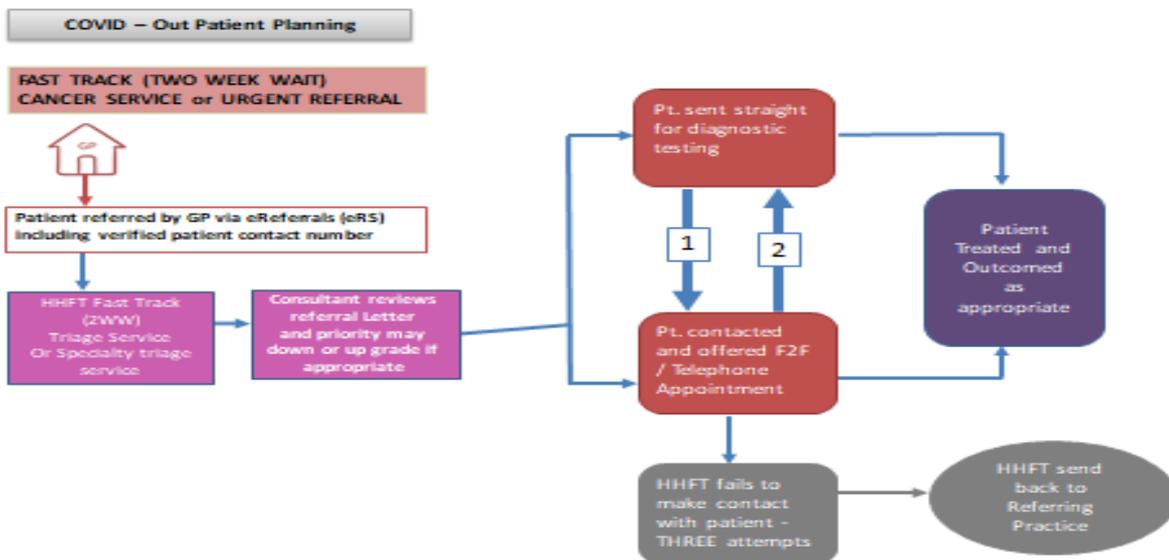
- From **30th March** all outpatient appointments will be switched to non-face to face except where clinicians determine that they must be seen. HHFT will avoid where possible cancelling of clinics and patients / referrals should not be rejected with instructions to visit their GP in the future for re-referral.
- **Where patients need to be expedited** but already have an appointment please use HHFT Speciality name EXPEDITE Service eg. You will find this by selecting ‘Advice’ instead of ‘Request’

|  |
|--|
| Service Definition   |
| Service: Gynaecology Expedite Appointment Service - Basingstoke - HHFT - RN5 |

In the dialogue box, ensure the original UBRN is added and give clinical reason or attach a letter giving a clinical reason for a request to expedite – HHFT will review and offer advice and guidance back to the referrer or bring the appointment forward. This will be either a non-Face to Face appointment or if absolutely necessary Face to Face.

## New referrals

### ➤ **Fast Track (2 WW cancer) Or Urgent first appointment referrals**

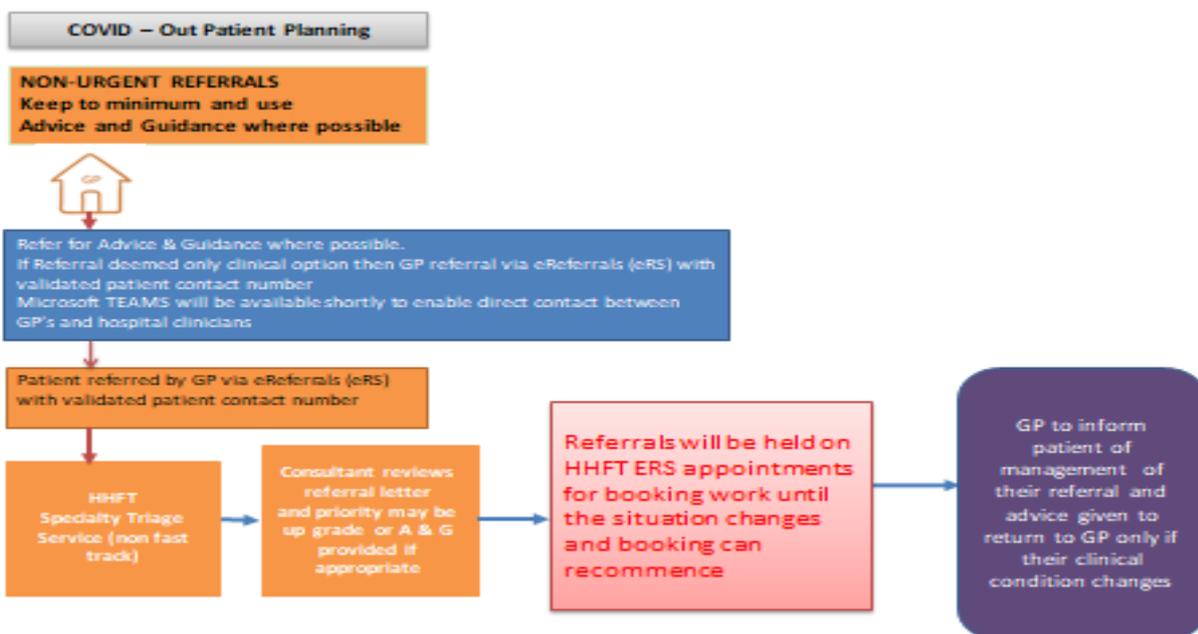


All the latest information on cancer will be available on Clarity TEAMNET North Hants COVID19 topic page.

### ➤ **Non urgent referrals**

**During this time please use advice and guidance where possible.**

Non Urgent referrals will be held and put onto an ERS HHFT appointment for booking work list.



➤ **Patient expectations**

It is important to help reduce queries to the hospital and with GP's at this time, by ensuring at the point of referral the patient expectations are managed and they are advised they will not be receiving an appointment date for their routine referral in the next 3-6 months.

➤ **Queries**

For any queries about the administrative processes detailed above please contact :

For ERS Julia Tickner (CCG) [julia.tickner@nhs.net](mailto:julia.tickner@nhs.net)

Jane Porter and Melanie Griffith (HHFT) [janeporter@nhs.net](mailto:janeporter@nhs.net) and [melanie.griffith@nhs.net](mailto:melanie.griffith@nhs.net)

**BMI Healthcare and COVID-19 response – Temporary closure of Out Patient Appointment Directory of Services**

As part of COVID-19 system planning BMI Healthcare will support Hampshire Hospital Foundation Trust with urgent and emergency case provision.

As a result of this support, there is a requirement for BMI Hampshire Clinic and Sarum Road to immediately close the eReferral Directory of Services (DoS), for provision of outpatients across all specialties. This will include Endoscopy to all non-urgent cases on the guidance received from the Joint Advisory Group for Endoscopy. Routine bowel screening may also be affected.

You may currently have some of your patients on eReferrals that will not be accepted by BMI Healthcare for outpatient appointments. These will appear on your eReferrals 'Referrer Action Required' worklists.

Please refer to the HHFT communication above.