

Consensus on Primary & Secondary Care Interface Summary

GENERAL

- Treat all colleagues with respect
- Remember to keep the patient at the centre of all we do
 - Ensure patients are kept fully informed regarding their care and 'what is going to happen next'
- Clinicians should seek to undertake any required clinical actions themselves, without asking other teams or services to do this, if within their competency and scope
- Whoever requests a test is responsible for the results of that test
 - Ensure robust systems are in place for patients to receive results of investigations, and that they understand what is going to happen
- Consider speaking to or messaging colleagues if in doubt
- When referring a patient to the Emergency Department, please ensure the patient is expected by, or has at least been signposted to a speciality team
- The clinician who wishes to prescribe medication for the patient should undertake appropriate pre-treatment assessment and counselling
- Try not to commit other individuals or teams to any particular action or timescale
- Use standardised referrals forms and IT systems (e.g. eRS) where available

PRIMARY CARE

- When referring to secondary care please ensure you are clear in your 'ask'
- When referring please clearly communicate to the patient who you are referring them to, for what and what to expect (if known)
- Please ensure appropriate Primary Care assessments have been made before referral
- Consider optimising any Long-Term Conditions in patients referred for surgery

SECONDARY CARE

- Ensure clear and timely communication to the GP following patient contacts
- Avoid asking General Practice to organise tests necessary for the hospital team's management of the patient
- If a new, acute fit note (sick note) is indicated (e.g. following surgery), please provide it for the entire duration of sickness expected
- If immediate prescribing is required from Outpatients, please prescribe
- When recommending ongoing prescribing from the GP please ensure this is in line with [NCL Interface Prescribing Guidance](#)
- Please consider follow up plans for in-patients who self-discharge
- If a patient does not attend an appointment, the decision to discharge or re-schedule should be made by a clinician who can judge the potential severity of disease
- Please arrange onward referral without referring back to the GP where appropriate
- Please follow [consultant to consultant referral policy](#)

