

12 September 2016

## **New template letters for breaches to standard hospital contract in England**

Dear LMC Colleagues,

GPC has today launched [template letters for GP practices](#) to push back on instances where hospitals breach new requirements in the standard contract.

To recap, following lobbying by GPC, NHS England have added the following requirements to the hospital standard contract as of 1 April 2016:

### **1. Local access policies**

Hospitals cannot adopt blanket policies under which patients who do not attend an outpatient clinic appointment are automatically discharged back to their GP for re-referral. Hospitals must publish local access policies and demonstrate evidence of having taken account of GP feedback when considering service development and redesign.

### **2. Discharge summaries**

Hospitals are required to send discharge summaries by direct electronic or email transmission for inpatient, day case or A&E care within 24 hours, with local standards being set for discharge summaries from other settings. Discharge summaries from inpatient or day case care must also use the Academy of Medical Colleges endorsed clinical headings, so GPs can find key information in the summary more easily. Commissioners are also required to provide all reasonable assistance to providers in implementing electronic submission.

### **3. Clinic letters**

Hospitals to communicate clearly and promptly with GPs following outpatient clinic attendance, where there is information which the GP needs quickly in order to manage a patient's care (certainly no later than 14 days after the appointment). For 2017/18, the intention is to strengthen this by requiring electronic transmission of clinic letters within 24 hours.

### **4. Onward referral of patients**

Unless a CCG requests otherwise, for a non-urgent condition directly related to the complaint or condition which caused the original referral, onward referral to and treatment by another professional within the same provider is permitted, and there is no need to refer back to the GP. Re-referral for GP approval is only required for onward referral of non-urgent, unrelated conditions.

## 5. Medication on discharge

Providers to supply patients with medication following discharge from inpatient or day case care. Medication must be supplied for the period established in local practice or protocols, but must be for a minimum of seven days (unless a shorter period is clinically necessary).

## 6. Results and treatments

Hospitals to organise the different steps in a care pathway promptly and to communicate clearly with patients and GPs. This specifically includes a requirement for hospitals to notify patients of the results of clinical investigations and treatments in an appropriate and cost-effective manner, for example, telephoning the patient.

It is estimated that 15 million GP appointments, staff time and expense is wasted each year due to these inappropriate demands and workload shift onto GP practices.

We have received feedback that in many areas CCGs and hospitals have yet to implement these contractual changes, and therefore at the specific request of GPC, NHS England and NHS Improvement wrote a [reminder letter](#) to all hospital providers to ensure adherence to these new requirements.

Our new [template letters](#) are designed to empower practices to demand that hospitals honour these contract changes, in order to relieve some of the daily bureaucratic burdens on GP practices.

### Action for practices

- I have highlighted the launch of these new templates in my **e-newsletter** to the profession today.
- We have produced a template letter for each of the hospital standard contract requirements, in order for practices to send any breach notifications back to the provider to take appropriate action. The templates can be embedded into GP clinical systems so that patient details can be pre-populated.
- Practices should also complete a pro forma template to send to their CCG regarding any hospital breaches, so that CCGs can be held to account as commissioners responsible for implementing these contract requirements.
- We have also asked practices to send details of the numbers and nature of breaches to the standard contract to LMCs on a monthly basis.

### Action for LMCs

- We would appreciate LMCs raising awareness amongst GPs and practice managers of these new templates - unless you have already implemented local initiatives.
- Please encourage practices to use the relevant template at each instance of a breach, since failing to do so will simply legitimise continuation of inappropriate workload shift onto practices.
- We have produced a [template LMC letter to send to CCGs](#) to ask them what measures they have put in place to ensure that Trusts implement these new contractual requirements. This could include CCGs supporting practices with installation of templates onto clinical systems, given that practice feedback of breaches will be vital to fulfil their contract monitoring responsibility as commissioners.
- We have also produced a [template LMC letter to send to hospital providers](#), requesting what measures they have taken to implement these new contractual requirements.
- LMCs should request that the standard contract is a rolling agenda item at LMC/CCG liaison meetings, with feedback of hospital performance on these new contractual requirements.

- We would appreciate LMCs feeding back information to GPC on breaches to the hospital standard contract, which will inform our national dialogue with NHS England.

Moving forward, we are taking forward a range of other priorities in our Urgent Prescription relating to ending inappropriate workload shift from secondary care. We will be discussing these at this week's inaugural GP Forward View primary/secondary care interface group, as well as at the LMC reference group later this month.

Finally, many thanks for playing your part in beginning to make a real difference in reducing inappropriate and avoidable GP workload, using the leverage of hospital contractual changes the GPC has negotiated with NHS England.

With best wishes

A handwritten signature in black ink, appearing to read 'Chaand Nagpaul', with a large circular flourish at the end.

**Chaand Nagpaul**  
**BMA GPs committee chair**