



Londonwide LMCs

The professional voice of London general practice

New requirements for hospitals re work with general practice

Londonwide LMCs' CEO Dr Michelle Drage has written to Trust and Foundation Trust CEOs across London asking how they plan to implement the new requirements outlined in the 2016/17 NHS Standard Contract, with particular regard to consideration of GP feedback and we will update you on their replies.

We have also produced a template letter to use if hospitals do not observe the new requirements in the way that they work with GPs and their practice teams. You can download it from our GPSOE site [here](#).

The six new requirements were highlighted to CCG Accountable Officers, and Chief Executives of NHS trusts and NHS foundation trusts in a letter dated 28 July sent from Matthew Swindells, National Director: Operations and Information at NHS England, and Robert Alexander, Deputy Chief Executive of NHS Improvement.

The letter says that time taken setting up and rearranging hospital appointments, as well as chasing up delays in discharge letters and details of changes in medication, accounts for 13.5 million, or 4.5% of GP appointments annually.

The new requirements, which aim to reduce these pressures on GPs, include:

Local access policies - covering discharge back to GPs for out-patient DNAs.

Discharge summaries - to be sent by direct electronic or email for inpatient, day case or A&E care within 24 hours.

Clinic letters - clear and prompt communication with GPs following outpatient clinic attendance.

Onward referral of patients - 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.

Medication on discharge - Providers to supply patients with medication following discharge from inpatient or day case care.

Results and treatments - hospitals to notify patients of the results of clinical investigations and treatments in an appropriate and cost-effective manner, for example, telephoning the patient.