

2WW Referral Redirection Process in e-RS (for use with Referral Assessment Services – RAS) – GP Process

Purpose:

2ww Referrals will be redirected to the referring GP from secondary care if any of the following apply:

- Suspected Cancer pathway guidelines (NICE NG12*) are not met
- Relevant blood results and investigation results are not provided
- The referral is inappropriate or incomplete with insufficient information to proceed on the suspected cancer pathway

This document outlines the process to be used in primary care to manage redirected referrals. This has changed due to the change from CAS to RAS and bringing in the new referral management automation product.

For information: FHFT Booking team will make contact with the patient to advise them that their referral has been redirected back to their GP.

The patient will be informed that their referral has been returned to the GP for further information and that they should now contact the GP for an update.

Scope:

This document provides guidance for GPs and primary care admin teams that are responsible for the management of cancer referrals in eRS.

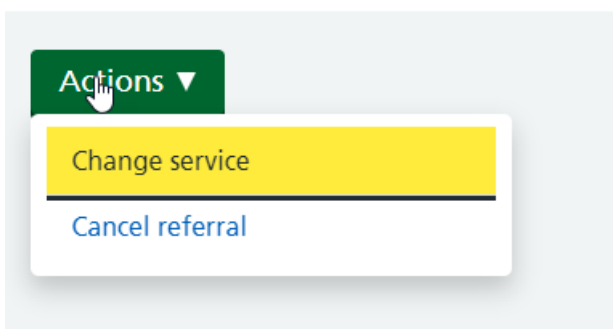
Process:

1. Referrals from the RAS services will appear on the **Rejected/ Triage Responses** worklist. The **referral Status** column will read **Triage Response**
N.B You can filter this worklist by **Priority** in order to highlight the **2 Week Wait** referrals

Filters applied - showing 12 of 69

Priority	Clinical context	Status
2 week wait	2WW/2WW Lower GI	Triage response
2 week wait	2WW/2WW Skin	Triage response
2 week wait	2WW/2WW Skin	Triage response
2 week wait	2WW/2WW Skin	Triage response
2 week wait	2WW/2WW Skin	Triage response
2 week wait	2WW/2WW Gynaecology	Triage response
2 week wait	2WW/2WW Lower GI	Triage response
2 week wait	2WW/2WW Lower GI	Triage response

- Click on the patient's UBRN number to display the **Referrer Comments**. (They can also be viewed by selecting **View History** in the action list).
- The referrals will either be being returned as
 - 2WW not appropriate (e.g. should be routine or urgent)
 - With advice (e.g. actions to take before referral) or
 - With a request to add more information (e.g. tests, assessments, correct forms etc).
- The referral info should be saved into the patients clinical record via the print and save options and workflowed appropriately to your clinicians
- The referral should then be cancelled with any reason or plan to re-refer included. Change service should not be used to send the referral back in to the same service as FHFT's systems mean they will not see it.



Enter more information about cancelling this referral

Reason for cancelling

- Patient intends to go private
- Referral raised in error
- Referral no longer required
- Other reason

Please provide any comments about the reason for cancelling

- If the 2WW referral is still required and you have now gathered all the missing information create a new eReferral from within the clinical system in the usual way.

* <https://www.nice.org.uk/guidance/ng12/chapter/1-Recommendations-organised-by-site-of-cancer>