



Gateway Reference 06955

To: CCG Accountable Officers, Chief
Executives of NHS trusts and NHS
foundation trusts

4 July 2017

Dear colleagues

Improving how secondary care and general practice work together – requirements in the NHS Standard Contract 2017-19

We wrote to you in July 2016, describing new requirements which had been added to the NHS Standard Contract for 2016/17 to clarify expectations across the secondary care / general practice interface. We also let you know about plans for the creation of a Working Group which would focus on and lead further improvements to the interface between primary and secondary care.

Including representatives from the Royal College of General Practitioners, British Medical Association's General Practitioners and Consultants Committees, Royal College of Physicians, Academy of Medical Royal Colleges, Royal College of Nursing, and National Association of Patient Participation as well as from NHS England and NHS Improvement, this Group began its work last year and has helped to shape further amendments to the [NHS Standard Contract for 2017/19](#).

The key requirements in the Contract, which came into effect on 1 April 2017, now cover the following areas in relation to the interface between primary and secondary care:

- Making referrals into secondary care
- Managing DNAs and re-referrals
- Communicating with patients and responding to their queries
- Managing patient care and investigations
- Issuing discharge summaries and clinic letters
- Managing onward referrals
- Prescribing medication and implementing shared care protocols
- Issuing fit notes

**NHS England
NHS Improvement**

The Working Group has produced a [summary document](#), in non-legalistic language, of the current Contract requirements – all of which are aimed at improving the convenience of services for patients whilst reducing avoidable extra workload for clinicians. We encourage you to bring the document to the attention of clinicians and managers within your organisations. The professional bodies which form part of the national Working Group will also be disseminating the summary document through their networks.

It is vital to ensure that rapid progress is now made in every health community in implementing these requirements. Many of them are simply about embedding good practice; others are more complex, particularly where IT improvements are needed to enable discharge summaries and clinic letters to be transmitted electronically. Not all health communities will be able to deliver all of these requirements in full from day one – but what is essential is that a detailed delivery plan is developed and implemented in each locality, with progress communicated regularly to local GPs and secondary care clinicians. **We urge you to take this forward as an important priority at local level.**

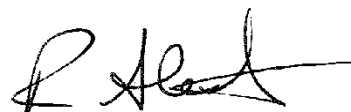
The Working Group will continue, over the coming weeks and months, to reflect on lessons learnt during local implementation of these new requirements – and, where appropriate, to make recommendations on adapting, improving and future-proofing relevant parts of the NHS Standard Contract.

As before, this will be with a view to ensuring that both GP practices and hospitals can continue to perform their respective roles as effectively and efficiently as possible.

Yours faithfully



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NHS England



Robert Alexander
Deputy Chief Executive
NHS Improvement