



**Worcestershire
Acute Hospitals**
NHS Trust

Our Ref: 2250/SAK/MLR

11 October 2018

Executive Suite
Worcester Royal Hospital
Charles Hastings Way
Worcester
WR5 1DD

Sent Via E-Mail.

Dear Colleague,

In March 2016 NHS England, the Academy of Royal Colleges, and the BMA produced “Standards for the communication of patient diagnostic test results on discharge from hospital”^{1,2,3,4}. This document sets out the standards and principles by which test results should be communicated between secondary and primary care. This document, and previous discussions between GPs and hospital clinicians, has prompted Worcestershire Acute Hospitals Trust (WAHT) and the Worcestershire Local Medical Committee (LMC) to develop local policies and principles for the safe transfer of information about diagnostic results and tests between primary and secondary care.

WAHT and the LMC have agreed-

- 1) The underlying principle for this policy is that the clinician requesting and ordering a test for a patient should be responsible ultimately for ensuring that the test is reviewed, acted upon, and communicated to the patient. It is not the role or responsibility of primary care practitioners to follow up the results of outstanding investigations organised by secondary care. As a corollary it would be equally inappropriate to expect hospital clinicians to review test results requested by GPs.
- 2) Every test result received by a Clinician should be reviewed by a member of the clinical team and where necessary acted on by a responsible clinician even if this clinician did not order the test. As to not do so could lead to patient harm. Correct use of the ICE requesting and reporting system will help avoid results being allocated to the wrong clinician.
- 3) Primary care teams should have a system to ensure that any discharge information they receive is seen and acted on in a timely manner by a clinician able to understand the importance of the information and able to take responsibility for taking appropriate action.
- 4) If a patient needs on-going investigation(s), such as radiology, ECG, echocardiogram etc, and will remain under follow up by a hospital clinician:
 - The hospital clinician should arrange (where there is no shared care arrangement) for the appropriate investigation(s) and follow up the results and the patient should be informed that this is the case.

5) Where further investigation(s) are felt to be warranted but the patient will not remain under secondary follow up care the hospital clinician should:

- Suggest to primary care the course of action recommended and consider whether a shared care protocol is appropriate.
- Explain in writing their rationale for this.
- Bear in mind that ultimately, it is the responsibility of the general practice clinician to decide with the patient what further tests are required, to arrange these, and to follow up the results.

We hope the above will provide some clarity over responsibilities by primary and secondary care clinicians for the safe transfer of information about diagnostic results and tests. These would be adopted by primary and secondary care clinicians of all grades. We envisage continued whole system learning and improvement and welcome constructive suggestions to this effect, to improve safer patient care.

We thank you for your co-operation.

Yours sincerely



Dr S A Kapadia
*Chief Medical Officer
Worcester Acute Hospitals
NHS Trust*



Dr Gillian Farmer
*Secretary
Worcestershire and Herefordshire
LMC Ltd*



Dr George Henry
*GP Clinical Lead for Quality
for Worcestershire CCGs*

¹ NHS England Patient Safety Domain, 10 March 2016: Standards for the communication of patient diagnostic test results on discharge from hospital

² <https://www.england.nhs.uk/patientsafety/wp-content/uploads/sites/32/2016/03/discharge-standards-march-16.pdf>

³ <http://www.bma.org.uk/support-at-work/gp-practices/service-provision/duty-of-care-to-patients-regarding-test-results>

⁴ www.bma.org.uk/-/.../gpc-letter-to-ccgs-test-results-march-2016.pdf.