

GP Support Unit

Standard Operating Procedure

Non-NHS Requests

Version 1.0

Version	1.0
Approved By (sponsor group)	Dr Delroze Miah - GPSU
Ratified By	Quality Assurance Group (QAG)
Date Ratified	16/11/2022
Name and Job Title of Author	Kirsty West & Janice Brazier – GPSU Patient Records Team Leads
Executive Director Lead	Dr Vaishali Ashar
Implementation Date	17/11/2022
Last Review Date	N/A
Next Review Date	October 2025
SOP Owner	GPSU Patient Record Team Leads
Accountability	GPSU Manager & GPSU Clinical Director

Version Control Summary

Version	Date	Author	Comment
1.0	October 2022	Kirsty West & Janice Brazier	Original

Contents

1. Background.....	3
2. Purpose.....	3
3. Scope.....	3
4. Receipt of request.....	3
5. Managing Requests.....	5
5.1 Subject Access Requests (SARS).....	5
5.2 Insurance Reports – From patient or company.....	5
5.3 Medicals – DVLA, Taxi, Fostering, Health Declaration Forms.....	6
5.4 Private Letters / Medical Reports:.....	6
5.5 DWP – UC113/PIPS/ESA.....	6
6. Coding non-NHS requests.....	6
7. Review.....	7

1. Background

There are a vast number of non-NHS forms which require a clinicians' attention. All incoming transactions are to be supported by documentation, either a cash receipt, cheque, or notification of BACS payment.

This SOP should be read in line with the ELFT 'Non-NHS Charges' Policy.

2. Purpose

This Standard Operating Procedure (SOP) has been written to:

- Ensure staff can accurately process and record Non-NHS Additional Income
- Ensure that staff are aware of their roles within the process of recording non-NHS income

3. Scope

This SOP sets out the process relevant to administrative staff working within the GPSU who will process and record non-NHS income.

- Patient record coordinator team

4. Receipt of Request

All documents must be complete within 28 days of receipt and payments completed.

Note: This timeline can be extended for a further 2 months for complex, numerous requests.

If there is a request from the patient to view the request before being sent this adds an additional 21 days to the above timeline.

4.1 Patient Record Coordinator Team Responsibilities for Non-NHS Requests

- Check all relevant paperwork is provided, filled in by patient with updated contact details
- Formal notification of the proposed fee and any further terms and conditions relating to the completion of the report should be communicated and agreed before processing.
 - If the request is submitted by the patient visiting the practice the fee's must be paid at the time the request is handed to reception.
- Check that the patient has signed consent if appropriate (Note: Consent forms will be included in paperwork from insurance companies. If no consent form is available / patient request is over the phone the patient record team must request a written consent letter in order to proceed)
- Log the arrival of the document in the practice system
- Check fees are paid if relevant (Refer to the ELFT Fees for Non-NHS Services procedure for costs)
- Search for the patient using the patients Date of birth and check that the details marry up with the information requested and update the patient record with details of the request, what has been requested and when the request deadline is.
- Complete the cover form to accompany the request which includes patient details, confirmation that the request has been logged and updates throughout the process to track the status of the request.

4.2 The Patient Record Team Actions Before Doctor Review:

Prepare to complete in pencil only.

- In the left panel, click on 'Administrative' and select 'GP registration details' on the 'Medical Records Flags' section, look for the date "Records here" and write this date on the front of the forms
- Depending on the report, tick boxes may highlight possible symptoms e.g., Diabetes. Click on 'Clinical' and in 'New Journal' on the left drop down box highlight 'Full'. On the drop-down box on the right type 'Diabetes'
- This will show any history of diabetes in the search. Check the dates shown and under the same section go to 'Communications & Letters' and select any letters which require printing.
- The same process above applies to any other questions on the form which require symptoms to be checked.
- Blood pressure readings may be requested. To find this information select the BP icon at the top of the patient record to open 'BP Graph'. Hover cursor over the red line to show readings and date, add to form as required.
- If medications are requested on the form, then the medication list will require printing. Click on history and 'Medication Filter & Action Group History' data will appear. In the middle of the page, right click and select 'Table' open as "RTF" remove your name, scroll down, and print only the pages relevant to the form.
- Click on 'Appointments' scroll down and click on 'Waiting Lists' on Left side, 'New Waiting List' will show with various options. Under 'Description' scroll to 'Drs forms to be completed' click on this.
- On the same page under 'Patients on Waiting List' click on '+Add Patient' The box 'Add Patient to Waiting List' will appear. Add notes and click 'OK'
- Click the green 'Save' icon on the top of the screen.
- Collect all printed letters/medical lists etc and keep together with your completed medical form. Place in an internal envelope marked to the required doctor, place in the relevant pigeonhole for this doctor.

Add the information to the Non-NHS Medical Non-NHS Spreadsheet

Once the report has been completed ensure copies are made and kept within the practice record system by scanning onto Systmone and saving to the patient record.

Patient request to view a Non-NHS Request:

The patient may want to view medical records before being sent to third party - they have 21 days to do this. The below process applies to all non-NHS requests:

- If the patient wants to view before being sent back the request will have a box which is ticked. The patient record coordinator must write on the front of the form "Patient view / Patient not to view" before handing to the GP.
- Once the form has been completed by the doctor. Text patient via 'SMS' icon 'Your documents are ready to view from our (*Insert branch name*) branch' take and leave in reception (With Medical Reports form for signing) in correct alphabetical order. The patient will be required to sign a form to confirm they have viewed the form and are happy.

- The patient record should be updated with a new coded entry stating 'Report ready to view in branch reception'
- The patient record coordinator should check if the form has been viewed and if not after 1-2 weeks send a follow up to the patient
- If the 21-day turn around is met and the patient had not viewed the form the form must be sent and a notification sent to the patient advising that they can no longer view the form.
 - Once the paperwork has been signed the read code should be updated to confirm the reports have been sent along with any tracking.

5. Managing Requests

Non-NHS requests will either be received from a company or directly from the patient.

The Patient Records Co-ordinator Team is responsible for checking that all relevant paperwork has been provided and has been filled in by the patient with updated contact details. For any request the Patient Records Co-ordinator Team should first check if the patient is registered and that all details on SystemOne match the request – name, date of birth and address. If not, the request is to be sent back to the patient / company.

5.1 Subject Access Requests (SARS)

- Log the request in the patient record on SystemOne – If details do not match what is on SystemOne then the request should be returned to the company to provide the correct details
- Log on to Non-NHS tracker
- Use IGPR to redact all the third-party information – select auto-retract
 - If it is the first time using IGPR a new account must be set up first
- Once information has been retracted save the record and in the top of the screen either select send to insurance company or if the patient has requested to see a copy press save and follow the process for patient requests in section 4.2.
- This information from IGPR will automatically save in the patient record within Systemone. Therefore, the patient record coordinator needs to update the Non-NHS tracker and the SARS monthly tracker.

5.2 Insurance Reports – from patient or company

- Check that the correct fees have been paid / agreed to be paid
 - If approved fee's (Per BMA guidelines) then the invoice will be sent along with the paperwork
 - If non-approved fee send an email to the company and only start the process once the fee has been agreed
- Check that consent has been provided - consent must have been provided within the last 6 months otherwise send request back.
- Log in patient record on SystemOne
- Log on Non-NHS tracker
- If requested by IGPR, redact third-party information, and send to the doctor for review
- Send forms to IGPR via IGPR Portal
- Update non-NHS tracker and this will automatically send the invoice
- Send the company the completed insurance forms via signed for recorded delivery or if patient request the patient should collect from the practice

- Invoice to be sent to sbs-w.cmr@nhs.net.

5.2.1 Medicals – DVLA, Taxi Driver, Fostering, Health Declaration Forms

- Book a face-to-face medical if required with the doctor. To do this follow your local practice appointment availability guide
 - Upon receipt of a request which requires a medical the patient record coordinator team will book the appointment in one of the Non-NHS appointment slots for the GP and send a text / call the patient advising the appointment date.
- This should be booked within 28 days of payment / confirmation of payment
- Once forms are complete, they should be:
 - Sent to the company via recorded delivery if from company
 - Patient record coordinator to contact the patient to collect the forms once complete if from patient
- Once sent the Non-NHS tracker should be updated.

5.2.2 Private Letters / Medical Reports

- Payment will depend on the type of letter or report requested (Can range from £30-£100, see [BMA guidelines](#))
- Send the request to the doctor to complete
 - The patient record coordinator team must check all paperwork has been signed by the doctor and any notes left by the doctor for actions i.e. remove / add documentation.
 - Stamp with surgery stamp where the doctor has signed.
- Request to be collected either by the patient or sent back to the company
- Update Non-NHS tracker.

5.3 Department of Work and Pensions (DWP) – UC113 / PIPS / ESA

- UC113 Forms – Print the General Practitioner Report (GPR) and once complete the DWP is sent via self-addressed envelope
- PIPS / ESA Forms are sent to doctors for completion and once completed they are sent via recorded delivery and the invoices should be included with the forms for the correct fees

6. Coding non-NHS requests

When logging Non-NHS requests within SystemOne the below codes should be used by the patient record coordinator team:

- Medical report requested (Snomed code 310455000)
- Solicitor report requested (Snomed code 313374008)
- Medical report sent (Snomed code 185008008)
- Solicitor report sent (Snomed code 18498005)

The patient record coordinator who uploads the nonNHS request is also responsible for any required Read coding.

7. Review

This policy will be subject to review every three years, or, in light of any changes to National Standards or Trust Policy.