

Options for processing a DMIRS referral on PharmOutcomes.

The PharmOutcomes screens for DMIRS referrals become more familiar after you have done a few DMIRS consultations, but until then they can be a little confusing. This guidance is intended to help you be confident that you know what your options are when you receive a DMIRS referral.

When you receive a referral, it will be visible when you click on the Services tab.

The new referral will be at the very top of the list, above 'Recent Provisions'

Click on the referral line ('NHS111 DMIRS...') to open up the referral.

You will see a screen with a summary of patient details and also a section that looks like this:

Acceptance and completion of referred service
This referral has been made to your organisation at the request of a patient.
If you are unable to complete the referral, you can reject it, but please select the reason for rejection from the drop down list below.
If you can accept the referral but cannot complete the associated actions immediately, click on the accept button to acknowledge receipt of the referral. You can make relevant notes in the Notes box.

Reason for rejection:

Select the reason for not being seen in the pharmacy ▼

Complete now **Accept** **Return (unable to complete)**

[\[-\]Click to hide Referral History](#)
Referral History
Automated ITK Referral - Referred to Well (Branch: 200620 - Coombe Park FCE79)
2019-04-22 18:21:25

Your three options are:

Complete now – this opens up the DMIRS consultation on screen and allows you to complete the consultation (or escalation) and claim for the service.

Accept – allows you to show the system that you are aware of the consultation but are not in a position to complete it (usually because the patient has not yet presented, or been contacted)

Return (unable to complete) – if you are certain that you cannot complete the consultation then select this option, along with a reason for rejection from the drop down list immediately above and type something in the notes box

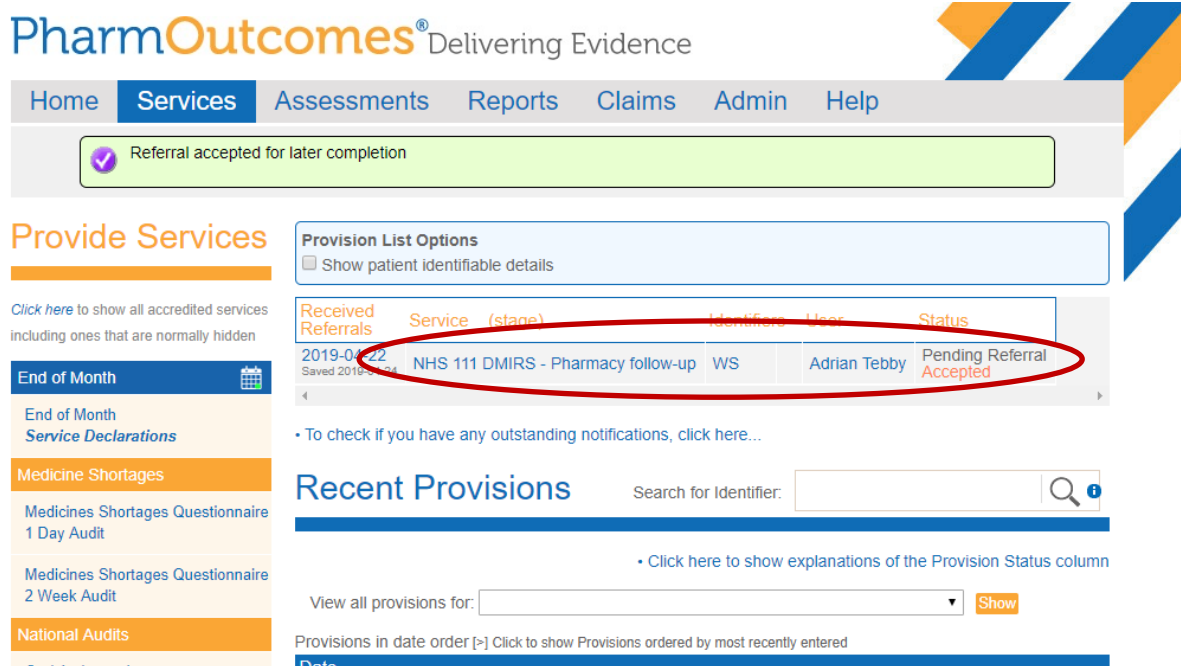
Preferred options here are 'Complete now' (to record the consultation and claim payment) or 'Return (unable to complete)' as these options mark the referral as completed.

If you need to select 'Accept' or choose to do nothing with the referral then be aware that it will stay on the system as 'live' and the commissioner (NHS England) will know that the referral is outstanding.

You need to ensure that you do not allow referrals to stay as outstanding on your system for long – the Service Specification obliges you to process DMIRS referrals promptly, and within 12 hours you should be able to complete or return every consultation. We appreciate that if a referral is received when the pharmacy is closed this may not be possible. We would however expect this to be actioned on the next working day.

If you do need to use 'Accept' in order to process the referral later, then please read on!

When you return to the referral (to complete it, or to return it) then you will again find the referral at the top of your Services tab list:



PharmOutcomes® Delivering Evidence

Home Services Assessments Reports Claims Admin Help

Referral accepted for later completion

Provide Services

Click [here](#) to show all accredited services including ones that are normally hidden

End of Month

End of Month
Service Declarations

Medicine Shortages

Medicines Shortages Questionnaire
1 Day Audit

Medicines Shortages Questionnaire
2 Week Audit

National Audits

Cost Assessment

Provision List Options

☐ Show patient identifiable details

Received Referrals	Service (stage)	Identifiers	User	Status
2019-04-22 Saved 2019-04-22 14:00	NHS 111 DMIRS - Pharmacy follow-up	WS	Adrian Tebby	Pending Referral Accepted

To check if you have any outstanding notifications, click [here](#)...

Recent Provisions

Search for Identifier:

Click [here](#) to show explanations of the Provision Status column

View all provisions for: **Show**

Provisions in date order [-] Click to show Provisions ordered by most recently entered

Date

As before, open the consultation by clicking on the 'NHS111 DMIRS...' line. You then have an options screen that looks very similar to the one when you originally opened the referral:

Acceptance and completion of referred service

This referral has been made to your organisation at the request of a patient.
 If you are unable to complete the referral, you can reject it, but please select the reason for rejection from the drop down list below.
 You can make relevant notes in the Notes box.

Reason for rejection: Select the reason for not being seen in the pharmacy ▼

Complete now
Update
Return (unable to complete)

[\[-\]Click to hide Referral History](#)

Referral History

Accepted by Well (Branch: 200620 - Coombe Park) :
 2019-04-24 10:01:44
 Automated ITK Referral - Referred to Well (Branch: 200620 - Coombe Park FCE79)
 2019-04-22 18:21:25

Here you need to either 'Complete now' or 'Return (unable to complete)' – these are your only two options to show the service as finished.

If you select 'Update' the referral will stay as incomplete and 'live' on the system (and go back to the top of your services tab, still showing its status as 'accepted')

A note about Escalation:

If the outcome of the consultation with the patient is that the patient has been escalated, then this is recorded as an outcome of the consultation. **It's not a rejection of the service, it's an outcome after you have consulted with the patient** – so select 'Complete now' and work through the screen then select 'Patient escalated' as the consultation outcome. You will be paid for a DMIRS referral that results in an escalation.

Consultation outcome

Consultation outcome

- ☐ Appropriate advice given only
- ☐ Appropriate advice given and sale of a medicine
- ☐ Appropriate advice given and referral made to MAS
Dependant on local commissioning
- ☐ Patient sign-posted
- ☒ Patient escalated
- ☐ Reason not listed
If Other please specify

Escalated where?

- ☐ Urgent NHS111 Clinical Hub on 111*7
- ☐ Urgent appointment with GP
- ☐ Urgent to 999
- ☐ Urgent NHS walk-in
- ☐ Urgent A&E

Reason for referral/escalation

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