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Choose and Book

Introduction to Choose and Book

Choose and Book is a national service that will, for the first time, combine electronic booking (eBooking) and a choice of time, date and place for first outpatient appointment. By the end of 2005 it should be available to all patients in England requiring elective care (over 10 million each year). See also:

http://www.chooseandbook.nhs.uk/ (http://www.chooseandbook.nhs.uk/)

Choose and Book enables a GP to refer or book a patient to a service commissioned by their primary care trust (PCT), and to send an electronic referral letter with that referral or booking.

User guides and training material can be found at:

http://www.chooseandbook.nhs.uk/staff/training/index_html#endusermanuals (http://www.chooseandbook.nhs.uk/staff/training/index_html%23endusermanuals)
GP functions in Choose and Book

The functions that a GP can do in Choose and Book when completing a referral and booking are:

Booking a hospital appointment

With Choose and Book, there is the facility to book a hospital outpatient appointment electronically following your decision to refer. You make the referral in Vision as normal and you are then offered the opportunity to book an appointment. If you answer yes, the Choose and Book system is automatically launched, and the patient details are automatically verified against the Personal Demographic Service (PDS). A unique booking reference number (UBRN) is allocated to this referral.

You can now choose from four or five local hospitals and enter the specialty. This should give a list of available appointments, from which you can book directly following which an appointment confirmation letter can be printed. The clinical referral details are transferred automatically in the form of pre-defined XML message which can be updated later if required.
Booking done by administrative staff

This process does not have to be done by the doctor, though normally he or she would instigate the original referral. It can be done by administrative staff or, if the GP has exited Referral-Add without booking an appointment, once the UBRN has been allocated, the patient will in future be able to make the appointment themselves at their convenience via the internet. If the patient is unable to make a decision there and then, perhaps because they need to check with family, friends and at work, then once they have been given a unique booking reference number (UBRN), if preferred, they will also be able to ring the Booking Management Service and book an appointment through them.

The functions that a Practice Administrator can do in Choose and Book when completing a referral and booking are:

Conditions for making an electronic booking

The conditions that must be met before making an electronic booking are:

- The GP must be a "referring clinician" with authority to refer. This implies the business function of "Initiate Referral" (see Example - GP who also makes Choose and Book Referrals). If the GP makes a referral but prefers that the receptionist completes the eBooking at the reception desk, then that receptionist must be authorised to login and have a business function of "Proxy initial referral" and "Perform clinical booking management service."

- The referring clinician or receptionist must use Single Sign-on with a smart card to the national services. If accessed from an unsecured workstation, then all Choose and Book functionality is disabled. If a GP makes a referral from an unsecured workstation, then the receptionist/GP, if signed on with the smart card, can edit the referral later and make an eBooking.

- The patient must not have expressed dissent to eBooking - this is checked via a flag in PDS (Personal Demographic Service), and it is assumed that the default status on eBooking is consent. If dissent is expressed, then the
eBooking option is still available (ie is not greyed out) but an attempt to make a booking will result in an error explaining the reason.

- PDS details must be up-to-date - At the point of selection of an electronic referral, the user is reminded of the importance of ensuring that demographic details are up-to-date.

**Setting up Choose & Book**

When a GP is given the role of General Medical Practitioner within the NHS CfH, this allows him to carry out a number of business functions, which translated means access to specific functions within Vision. Initiating a Choose & Book referral is NOT one of the basic GP functions and must therefore be added to a GP’s role profile as an additional business function (see GP - Permitted areas and functions within Vision). This is done by the practice's "sponsor" using the RA01 form (the initial request to the Registration Authority) or the RA02 form (update request to the RA).

The Choose and Book functions are:

- B1101 Initiate patient referral (Choose & Book)
- B1102 'Proxy' Initiate patient referral (Choose & Book)
- B1103 Manage Appointment Bookings (Choose & Book)

Similarly, a role of receptionist will need two additional business functions:

- B1102 'Proxy' Initiate patient referral (Choose & Book) - For patients associated with the organisation of the user: manage appointment requests and referral letters, and request advice and guidance on behalf of a clinical user within the organisation, manage patient demographics and manage bookings.
- B1103 Manage Appointment Bookings (Choose & Book) - For patients associated with the organisation of the user: Manage patient demographics and manage bookings.

**Access Choose and Book via Vision using a smartcard**

If you want to access Choose and Book without opening a patient consultation, see "Access Choose and Book Home Page and select patient (page 38)", which explains how to access using Internet Explorer.

To access Choose and Book via Vision, you must first use your Smartcard to connect you to the Spine of the NHS Connecting for Health programme.

The Smartcard looks much like a credit card, with a picture of the user, together with their Unique Identification number (UID) and a gold chip where all the information is held.

To access Choose and Book, you should already be logged on to your computer, so you see your desktop on your screen

1. Put your smartcard into the smartcard reader
2. Type in your PIN number (also called Pass Code) and click on Yes I accept and wish to proceed, or press Enter on the keyboard.
3. You will now see a box in the bottom right corner of the screen with a progress bar, detailing the remaining time before the card will be authenticated. You may (or may not) now see a security alert.
4. Click Yes to proceed if you see a security alert.
5. Answer Yes to *Do you want to close this window?*
6. You are now logged on to the spine
7. If you have a problem logging on, see *Failure to connect* (page 9).
8. Double click on the Vision icon.
9. If you have more than one role set up for you, you will now see the *Select Role* box for Vision. Select your *Role* from the pick list of roles and click in the *Assigned Profiles* box.
10. Click OK.
11. The Vision home page will be displayed.

**Failure to connect**

If your login to the Spine fails, an error message will display and you will be offered the choices to **Retry** the logon, **Cancel** the logon or to **Work Offline** in Vision.

1. Click Retry.
2. If the logon still fails, click Details>>> to check that there is not a problem with the Smartcard reader connection.
3. If you still have problems logging on, contact your usual Help Desk.
Add a referral and request a booking

Note - This is a long section. You may want to print it out. (If viewing in on-screen help, click on the Print icon on the toolbar).

1. You need to sign on to Vision using the single sign-on with a smart card. If you have not used your smartcard when logging into Vision, the on-line booking functions will not be enabled.

2. Select the patient and start a consultation.

3. Start a referral in one of the normal ways:
   - Add - Referral
   - Select a referral from Default Referrals
   - Click on
   - Drag a medical history entry on to the bow-tie icon on the floating toolbar.

4. On Referral Add, make sure you make these three entries of on-line booking, Read Term for Referral Reason and TP Speciality:
   - Tick the Online Booking box (only enabled if there is a valid Single Sign On). This enables the E-booking button.
   - The Read Term for Referral Reason is a required field but it can be added either before or after the Choose and Book process. The Read term should be as specific as possible as it will form the title of the problem which becomes the referral message. Generic terms such as "Referral for further care" should be avoided.
   - Select the Urgency - Routine, Stat (Immediately), Urgent, 2 week Wait. This should be selected before pressing the eBooking button. If left at <None>, you will be reminded "An Urgency value must be selected".

5. Complete the Referral Add as you would normally do.
   - All other fields on Referral Add are optional in terms of Choose and Book but you would normally enter them. Many of the items detailed will be selected during the Choose and Book process anyway, so it makes sense to complete them after that process. Choices made in Choose and Book are not fed back to fill the Vision fields. The only field filled automatically is the UBRN (unique booking reference number).
- The **Provider Unit** will be left blank as you select this from the Choose and Book screen.
- The **TP Specialty** is optional. Note that the TP Specialty is not carried forward into Choose and Book.
- Click on **Notes** if you want to include some free text to accompany the referral; or to make an Advice and Guidance Request, type in **Advice Only**.

6. Once a tick is put in the **Online Booking** box, this leads to a prompt to check the patient details: *Before invoking the online booking process, it is essential to ensure that patient demographics are correct*. If you think these details may be incorrect, press Cancel and check them.
Note - We strongly advise that the receptionist booking patients in is signed on with their smart card and makes this check of demographic details with the patient beforehand, so that it does not hold up a GP in consultation.

7. Either confirm details with the patient (check these at the top of the screen on the title bar), and press Continue; or press Cancel.

8. Click on the eBooking button which will now be enabled.

9. Choose and Book is now launched in Internet Explorer and you will see the Choose and Book Bookings screen where you can search for services to which you can refer your patient. The patient is already selected.

10. You now need to enter the criteria against which Choose and Book will search for appropriate services that your PCT has commissioned. The Suggest Services button will remain inactivated until the user has selected an option other than the Select options. This will ensure that the user selects an appropriate priority when performing a booking.

11. The booking process is then carried on from the point where services specialty and clinic type are selected. The Choose and Book functions of adding a referral letter and adding attachments should not be used as these functions are dealt with in Vision. This latter point is important because only by carrying out these processes in Vision can the patient record include all relevant material passed to Choose and Book.
**Note** - immediately after opening Choose and Book, all that is achieved by this is the provision of a UBRN - a unique booking reference number. It is possible for the GP to close the Choose and Book screen at this point - the UBRN fills in automatically in Referral Add, and the GP clicks OK, and chooses Send Later. An admin member of staff then returns to edit the referral later to complete the Choose and Book screen, perhaps with the patient at reception.

12. You can search for services by different means. If you continue with the booking process, you must select at least the yellow mandatory fields of **Clinic Type**, **Specialty** and **Priority** (eg Routine, Urgent). This is a strongly recommended option as it keeps all the clinical judgments in the hands of the clinician and leaves the remaining work to admin staff. This option would include the clinician initiating an Appointment Request and the patient a print-out of the details to enable them to carry on the booking process later with other staff.

You should now refer to the Choose and Book training guides which give the latest features and functions for a Choose and Book referral.

http://www.chooseandbook.nhs.uk/staff/training/index_html#endusermanuals

1. Once you have completed either the Appointment Request or Appointment Booking, return to the Referrals Add screen and click OK.

2. On accepting a CaB referral, the Referral Message Digest (RMD) will automatically appear as a tab in the consultation pane. See "Referral Message Digest (page 14)".

**Note** - To send a referral letter, you have to have completed an appointment request, but you do not have to have made a booking of date and time. See also "Send an electronic referral letter on behalf of your GP by admin staff (page 35)"
Referral Message Digest

Referral Message Digest replaces Message problem

Referral Message Digest (RMD) was introduced in DLM 235. This no longer relies on the use of problems. It will now be much easier to maintain and update a referral message for Choose and Book referrals.

The Referral Message Digest screen (page 18) appears in the ‘consultation pane’ of the Vision 3 framework allowing it to be viewed side by side with other Vision 3 views and allowing easier drag and drop data.

The structure of the RMD is such that it easily allows you to choose what information is sent in the referral message, including Free text, Accompanying Data from Structured data areas, and Accompanying documents (e.g., referral letter).

You can choose whether or not to pre-populate the structured data area (using right click within a RMD and selecting Management Options - see "Auto Selection Options (page 16)"), and adding or removing data from this area is easier.

Switching on Referral Message Digest

You are now able to switch on the RMD functionality yourself. To do this, you must be logged in as a System Administrator.

1. From the front screen of Vision, click on Options – Setup.
2. Select the System tab.
3. Under **Other Options**, tick **Referral Message Digest**.

You are now able to configure the data selection options for the Referral Message Digest for your practice. See *Auto Selection Options* (page 16).
Auto Selection Options

You can decide what data to include automatically in the Referral Message Digest. At the time of the consultation, you can add or remove data as you wish. Note that this applies practice wide and not on an individual basis.

Only a user with administrative rights can access Auto Selection Options.

There are three ways to access the Auto Selection Options - the first two do not require a patient record to be open:

- From Consultation - Options - Setup - Management tab, select the Options button under Auto Selection.
• From **List - Default Referrals/Requests**, click on the **Options** tab, then under RMD Automatic Population Options, click on the **Options** button.

![Referral and Request Settings](image)

• If you have a patient record open displaying the Referral Message Digest screen, you can right click within the RMD and select **Management Options** for **Auto Selection Options**. Note that any change to Auto Selection via this option during a consultation will not take effect until the consultation is closed.

**The Auto Selection Options Screen**

On the **Auto Selection Options** screen, select which data you want to be automatically included in the Referral Message Digest (or electronic letter as it is termed on this screen).

The top right pane relates to **Choose & Book** and the Referral Message Digest.

• **Link to auto selected items** - If this is checked, the RMD screen will be populated with data selected from the left-hand Auto Selection Criteria list. If you want to use this option, then tick those criteria you want included in the left-hand pane, or you can use **Select All** to check all the options (and then uncheck those you do not want). **Clear Selections** removes all ticks. If all items are unchecked, then the RMD will be blank.

• **Link to items in the referral's consultation** - This will populate the RMD with the current consultation data as well as those selected in Auto Selection Criteria. This can be ticked in addition to Link to auto selected items.
Click **OK** to finish.

The **Referral Message Digest** screen

Start a Choose & Book Referral in the usual way. Check **Online Booking**, enter the **Urgency** and click the **eBooking** button.

On accepting a CaB referral, the Referral Message Digest (RMD) will automatically appear as a tab in the consultation pane. If the consultation pane is not already visible on this initial view of the Patient Record, then it will be made visible.

You can resize the vertical and horizontal boundaries of the RMD.

The RMD screen has four major areas: **Status/Control Area** (page 18), **Accompanying (free) Text** (page 19), **Accompanying Data** (page 19) and **Attachments** (page 25).

**Status/Control Area**

The **Status** area appears at the top of the screen and relates back to the Vision referral record. The referral may have one of the following states:

- **Referral Pending** - This is the initial state after saving the referral and indicates that the referral message is yet to be sent.
- **Referral Sent** - The referral message has been sent. Any changes to the RMD will change the status to **Referral Pending** indicating that the changes have yet to be sent.
- **Awaiting Send** - This indicates that a request has been made to send the message but the messaging engine has not yet processed it.

**Accompanying Text**

The minimum amount of data that can be sent with a referral is simply some free text accompanying it. The free text is optional and not populated by default.

**Accompanying Data**

The Accompanying Data area contains all the structured data to be sent with the referral (not including the referral record itself and certain patient demographics, including the UBRN, which are always sent). The initial population of the structured data area can be modified by changing the selected items on the Management Options screen which is accessed through the right click menu.

- **To include additional information**, drag it from the Journal or other list.
- **Use the auto populate option** - right click within the RMD, select Management Options and tick the criteria you want.
- **To remove information**, do one of the following:
  - use the right mouse option **Remove Selected Items**,
  - drag the item to a ‘waste-bin’ area,
  - select the item and press the Delete key.
Accompanying Documents, Letters and Attachments

Letters and attachments occupy a separate screen area in order to emphasise that they are treated separately within CaB but the functionality is much the same as for any other structured data. Any letters or attachments dropped on the structured data area will be directed automatically to the Accompanying Documents area and vice versa.

- A maximum of four attachments can be added to an RMD
- Each attachment is limited to 745 kilobytes.
- Attachments must not total more than 5mB.

If you try to add attachments that exceed these limits, an error message is displayed, stating which attachments could not be added and why.

See "Attachments (page 25)".

Send

In order to enable the Send button:

- You must be online.
- The patient must be synchronised or mismatched.
- The data must be different from the currently saved data.
- You must have rights to edit a C&B referral.
- There must be an open consultation.

The Send button is enabled only if the status is Pending.

Pressing Send will set the status to Referral Awaiting Send and close the RMD dialog.

Note - If you change a 'Sent' message and press Save or Send, this will set the message back to Referral Pending or Referral Awaiting Send and activate the Previous button to allow you to view the last message.
Save
In order to enable the Save button, the RMD must contain at least one item in any of the areas: Free text, Accompanying Data, Accompanying Documents. In addition:

- The data must be different from the currently saved data.
- You must have rights to edit a C&B referral.
- There must be an open consultation.

Pressing the Save button will save the data, but not close the dialog. The button will then become disabled.

An "Electronic Letter" line is created in the Journal with a status of Referral Pending.

Cancel/Close
Pressing the Cancel button will discard any changes from this session, leave the status unchanged and close the RMD. If there are any unsaved changes then a dialog will be shown at this point:

"Do you wish to save changes to the RMD?" <Yes> <No> <Cancel>

If the data in the list does not differ from the saved selections, then the Cancel button will be renamed Close.

If this is the only tab in the consultation pane, then closing this will result in the consultation pane being hidden.

If the consultation is closed without taking either action on the RMD, then it will be saved in its current state with no further prompts.

Closing the consultation and sending the message
Closing a consultation sends the message if it is at 'Referral Awaiting Send' status. Reopening the consultation will show the 'Electronic Letter' with a status of 'Sent'.

Journal entry once sent
On the Journal entry, the RMD is called an Electronic Letter. Single click on this to re-display the RMD in order to edit it.

Note - Both the referral and the electronic letter show the UBRN so it is easy to relate the two.
Subsequent Actions on RMDs

Having closed an RMD, it can be edited in the normal way by right clicking on the Journal line and selecting Edit. In addition:

- All pending RMDs will appear in the Alerts pane under the navigation pane on the left-hand side.
- On opening a consultation for a patient with pending RMDs, these will be automatically opened.

![Figure 1: A pending referral is shown on the Alerts pane under the navigation pane](image)

Figure 1: A pending referral is shown on the Alerts pane under the navigation pane.
**Editing and RMD**

Any changes to an RMD will automatically change the status to **Pending** (if it is not already pending) and enable the **Send** option. It is possible to send multiple RMDs for a single referral; each one will replace the previous instance on CaB.

Right clicking on the RMD background displays the following menu options:

- **Discard changes** - this button is available on the Pending version of an RMD. It will reverse all changes made in this session, restoring the referral status if appropriate.
- **Revert to this version** - Available on Sent versions of the RMD. All previously sent versions of an RMD are stored within an audit trail on the record (though in practice it would be unusual to send more than one). You can review the contents of the previously sent RMDs using the buttons at the bottom, editing as necessary and then send.
- **Don’t Send RMD yet** - Available when the status of the RMD is Awaiting Send. It resets the status to Pending.
Previously sent versions

You can review the contents of the previously sent RMDs using the buttons at the bottom of the screen. These arrows are not enabled until you have one sent version and have generated a further RMD. The left arrows show the previous sent version to the current one, and the right arrows the next version.

This allows you to edit the current Pending version and then Send.

You can also display a previously sent version and right click and select Revert to this version before pressing Send.

Urgent referral to Community Referrals department of Palliative Care Team
Status: Referral Pending
URBN: TEST

Accompanying Text:
Please monitor patient.

Accompanying Data:

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>24/01/07</td>
<td>PANADOL caps 500mg Supply (12 capsules) AS REQUIRED JM</td>
<td></td>
</tr>
<tr>
<td>24/01/07</td>
<td>Issue 1 PROPRANOLOL tabs 40mg Supply (28) tablets ONE THREE TIMES JM A DAY WHEN REQUIRED</td>
<td></td>
</tr>
<tr>
<td>24/01/07</td>
<td>MORPHINE supp 15mg Supply (12) suppositories AS DIRECTED JM</td>
<td></td>
</tr>
<tr>
<td>24/01/07</td>
<td>Repeal PROPRANOLOL tabs 40mg Last issued: 24/01/2007 issued: 1 maximum 99 allowed Supply (28) tablets ONE THREE TIMES A DAY WHEN REQUIRED JM</td>
<td></td>
</tr>
<tr>
<td>19/10/05</td>
<td>Certain Moderate Allergy known allergies SW</td>
<td></td>
</tr>
<tr>
<td>24/01/07</td>
<td>FH: Asthma</td>
<td>JM</td>
</tr>
</tbody>
</table>

Accompanying Document:

<table>
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<th>Date</th>
<th>Description</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>24/01/07</td>
<td>Letter 24/01/2007 Refer to FH: Congenital heart disease at department of with URBN TEST by Dr John McAllister JM</td>
<td></td>
</tr>
</tbody>
</table>
**Attachments**

**Referral Letters**

A conventional referral letter can be added from Referral Edit by clicking on 💌. The letter can then be moved into the Accompanying Documents section of RMD.

**Correspondence**

All letters added to Vision as correspondence are stored with extension .cli regardless of what they were originally (.doc, .hed (HiEdit), .txw (VizEdit)). Now .cli letters that were originally .hed or .txw are converted to .rtf before sending.

**Correspondence**

Note that there are certain rules:

- Word documents (.doc) are allowed as attachments so you can either send a referral letter, generated in the usual way on the Referral Add screen, or send a Word document as an attachment. You can also write free text notes on Referral Add to make your request or draw attention to something. Remember that the patient’s clinical history is already on the spine so there is no need to repeat it.
- You can send files formatted as .gif, .tif, .doc, xml, jpg:

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- You can send up to **five** attachments per referral booking.
- Each attachment must be less than 1 mB.
- The total attachments cannot exceed 5 mB.
Guidelines sent as attachments

Many people attach guidelines with referral letters.

There is an icon in Guidelines on the toolbar which when pressed lets you save the currently displayed guideline as a .gif attachment in Attachments - Add.

This is especially useful for practices making Choose and Book referrals to which attachments are added.

Note that it works best in terms of display for guidelines with the standard black or blue on white background. Coloured guidelines do not display well.

Note too that if the guideline has a category of Report, then it will go straight to the printer before you can use this attachment icon. Should you wish to attach a report, make a copy of the report as a Local Guideline: in Select Guidelines, call up the report, click on Copy, then at the Plan Header - Copy screen, type in a new Guideline Mnemonic (10 characters), and make sure the Category is Local Guideline. Add it to the Local Guideline or Report Index. When you select it from the Local Index, it will be displayed on screen, giving you a chance to save it as an attachment.

Removal of unused unique booking reference numbers (UBRNs)

In order to stop unused UBRNs lingering on the system (ie where a choose and book referral has been started but not completed and is no longer required), from now on when you delete a Choose and Book referral, the associated UBRN is also removed from the patient's record and the Spine. This now allows you to have a view of only valid Choose and Book Referrals for the patient.

You can delete a Choose and Book Referral by either deleting the Referral or RMD entry from Consultation Manager. The associated UBRN is removed from both entries when one of either entry is deleted.
**Update Your Referral Letter**

You can update and change the attachments you have sent as referral letters once you have submitted the original for Directly Bookable Services up until the freeze time is reached.

*Freeze time* is the number of days ahead of the appointment after which no further changes to the referral letter will be accepted. After that time, the referral is "frozen". In Referral Letter Details in Choose and Book, you can define the referral letter lead time and freeze time.

*Lead time* is the number of days ahead of the appointment time that the referral letter must be submitted by a referrer.

Each time you change the referral letter attachments and resend them, they will appear in the hospital clinician’s worklist for them to review once again.

If the appointment is booked to an indirectly bookable service, the freeze time is enforced immediately (i.e., once a referral letter has been attached, it cannot be updated).

1. Open the patient’s record.
2. Find the referral item.
3. Right click on the referral and select *Edit…* This will re-open the referral entry.
4. Click *OK* on the *Referral – Add* screen.
5. Click on the letter icon to re-open the referral letter and make any amendments.
6. Save and close.
7. Click *OK*.
8. You will be given the choice to *Resend*.
9. Click *Yes*.
10. If you want, add or remove any items from the referral message digest.
11. A message displays warning that the message will Recompile.
12. Click *OK*.

*Note* - All previous Problems, Journal entries etc. will be reset back to original i.e. you will need to repeat tasks from the first send.
Referral Message Problem

This section is for those who continue to use the former Referral Message Problem rather than the newer Referral Message Digest. Our advice is that the advantages of Referral Message Digest outweigh the continued use of the former Referral Message Problem (see "Referral Message Digest (page 14)").

When you click OK on the Referral Add screen in Vision, you are asked if you wish to send a referral message on deselecting the patient.

If you click Yes, when you deselect that patient and close the consultation:

1. The appointment booking request is sent.
2. A Referral message problem is created (viewable from the Problems tab), called MSG:[Read Term for Referral], eg MSG:Asthma.
3. Vision gathers up sets of information from within your patient record of the previous 3 months
   • the UBRN (unique booking reference number)
   • All data entered in the current consultation, including the referral Read Term for Referral Reason
   • Current medication, defined as all repeat issues and all acute therapy issued in the last three months
   • Allergies and intolerances (drug and non-drug)
   • High priority medical history - marked priority 1,
   • The latest records for smoking, alcohol, height, weight, blood pressure
   • All test results within the last 3 months
   • All active problems - the Read code from the problem header will be extracted and send as a 'Conditions' item
   • All active disease registers - ie those with a start date but no end date. These are exported as 'Conditions' in the same way as active problems.

For Example:
The current problem is ‘Bowel Cancer’ and contains the diagnosis of bowel cancer and any other data that the GP considers pertinent to this problem.

After entering the referral (make booking):

• There are now two current problems, ‘Bowel Cancer’ and ‘Bowel Cancer Referral Message’. The latter problem contains the referral, all other data in the consultation, summary of relevant clinical items, and all the data in the ‘Bowel Cancer’ problem.
• The ‘Bowel Cancer’ problem contains the data it previously contained along with the referral and a link to the message digest problem.
• Any data subsequently entered in the consultation will automatically be included in both problems (although it may be removed).
After closing the consultation:

- The situation will be restored to one current problem ‘Bowel Cancer’. The message digest problem can be accessed via the inactive problems list or directly from the link within the Bowel Cancer problem.

Editing the Referral Message Problem

You may edit the messages by:

- Adding to or removing from the problem any existing data
- Adding further data by making new VISION entries
- Editing existing entries (e.g. by adding free text comments)

To remove a Problem item from the message:

1. Click on the Problems Tab.
2. Click on the item to highlight it.
3. Right click the highlighted line.
4. Select **Remove from Problem**.

**[MSG]: Hypertension**

- 05/02/2005 BP 165 / 90 recall 12/03/2005 O/E - blood pressure reading Dr David Byun
- 05/02/2005 Repeat SIMVASTATIN tabs 40mg until 12/03/2005 Issued: 30 Supply: 28 tablets ONE EVERY NIGHT
- 13/02/2004 Serum cholesterol = 4.3 mmol/L Dr John Nicolson
- 13/02/2004 Serum cholesterol = 4.3 mmol/L Dr John Nicolson
- 27/05/2002 BP 136 / 80 recall 27/05/2003 O/E - blood pressure reading Mrs Stella Winter
- 23/10/2001 BP 140 / 79 recall 21/04/2002 O/E - blood pressure reading Mrs Stella Winter
- 02/04/2001 BP 145 / 92 recall 02/04/2002 O/E - blood pressure reading Dr Lindsay Smith
- 21/01/2001 BP 148 / 85 recall 21/01/2001 O/E - blood pressure reading Dr Lindsay Smith
- 08/11/1997 Serum cholesterol 6.9 Dr Unknown Unknown
- 13/09/1995 Weight 82.05 kgs BMI 32.6 O/E - weight
- 15/05/1994 Height 1.68 metres O/E - height
- 15/05/1994 Weight 82.94 kgs BMI 32.7 O/E - weight
- 23/05/1993 Weight 83.91 kgs BMI 31.5 O/E - weight
- 23/05/1993 Current drinker - units per week 3 Alcohol consumption
- 1994 HYPERTENSION ON TREATMENT
- 1994 Hypertensive Disease Placed on register 1994

**[MSG]: Hypertension Observation Only**

- 01/01/1948 Ex-smoker - Cigarettes: 10 Stopped smoking

**New Problem**

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To add an existing item from the Journal or any filtered list:

1. Click on the Journal tab or a filtered tab.
2. Right click on the item. A context sensitive menu displays.
3. Select **Problems**...
4. This produces a list of the patient’s problems. Tick the problem(s) to be included in the message.

![Current Problems](image)

5. Click **OK** to include the item(s) in the message problem.

All the data that will be included in this message will be placed in the [MSG] Referral Read Term Problem and you can review and/or amend the data at any point before you close the consultation.

When you Desselect the Patient (depending on your configuration the patient may be deselected when you close the patient’s consultation), this referral message will automatically be sent electronically via Choose and Book to the Provider where the patient either has been, or will be booked in to.

Thus this referral message becomes your new electronic referral letter.

**Attachments with Referral Message Problems**

If you want to send an attachment with the referral booking, an attachment will go into a problem in the same way as a data entry - add your attachment, then right click on the Journal line, select Problems and allocate it to the relevant problem.
Send a Referral Letter/Message Later

Once you have either created an Appointment Request, or you have submitted a Booking via Choose and Book, you are returned to the Referral - Add screen in Vision. Click OK and you are asked if you wish to send a referral message on deseleting the patient.

Answer No if you wish to send the referral letter/message later in order to review the data, add data, remove data, include a referral letter etc. Then finish and close the consultation as normal.

The referral message problem [MSG] Referral Read Term Problem will not yet be created. You can then edit the booking later.

Any other data you then enter during the consultation is then added to the referral message problem, which remains open, until you close the consultation.

You can edit the referral (and eBooking to add or change the hospital appointment time). When you have completed your tasks, you click on Referral-Edit, this time you can choose Send Now (or Yes), creating the referral message problem and sending it when the patient is deselected and the consultation is closed.

To create and send the message subsequently

1. Open the patient record in Consultation Manager.
2. Find the referral item on the Journal.
3. Right click on the item, and select Edit…
4. This will re-open the referral entry.
5. You may now create a letter in Vision in the conventional method (click Letter , choose template, complete the letter). A red tick displays on the Letter button once the letter has been completed.
6. You can add attachments (page 25).
7. You can amend the referral letter (see Update Your Referral Letter (page 27)).
8. A receptionist can complete the booking on the GP’s behalf - see Send an electronic referral letter on behalf of your GP by admin staff (page 35).
9. When you click OK having edited Referral Add, a message asks: "Do you wish to send a referral message when this patient is deselected?".

10. This time, choose Yes and follow the procedure described above to deal with the resulting message problem.

11. If you want to add any data to the referral message problem, right click on that data line (eg, from the Journal), select Problems... then tick the box of the Referral Message Problem.

12. If you want to remove any item from the referral message problem, go to the Problems tab, left click on the item to highlight it, then right click and select Remove from Problem.

13. When you Deselect the Patient (depending on your configuration the patient may be deselected when you close the patient’s consultation), this referral message will automatically be sent electronically via Choose and Book to the Provider where the patient either has been, or will be booked in to.

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**Troubleshooting online booking**

**Online Booking checkbox is disabled on Referral Add**

The user has not made a valid successful login with their smart card and PIN.

**Patient does not consent to on-line booking**

Patients can withhold consent from on-line booking. If you attempt an on-line booking/referral, the following message is shown if the patient dissents:

"This patient has not allowed access to their record for the purpose of electronic booking. This booking cannot be made online. Consult the manual or online help for details of consent mechanisms."

You are then returned to the referral form with **Online Booking** unchecked. The consent status can be changed through tools provided by NASP (details currently unavailable). If changed, you may try the booking again.

**Try and exit from Referral form without making eBooking**

If you try to click OK to exit from the Referral form when Online Booking has been checked, and you have not invoked the booking process, you will be warned and returned to the Referral form. You must then either uncheck Online Booking or click on the eBooking button.
Edit a referral booking

A referral booking may need to be updated by the receptionist:

- if the patient cannot now make the original booking date
- or if the GP does not have time in consultation to complete the eBooking process, and has selected Send Later when clicking OK on Referral Add,
- or if the referral was added at an unsecured workstation without access to Choose and Book.

To edit a referral created by the GP without eBooking:

1. Select the patient in Consultation Manager.
2. Open the existing Consultation that the GP used to add the referral. Look on List - Referrals to find the date of the referral. Close any consultation that has opened for today (you will first have to uncheck the option Deselect the patient when closing a consultation, in Consultation - Options - Setup). Click on Consultation - List consultations. Find the consultation on the date of the referral. Select Consultation - Open Existing consultation. Click on the Consultation Line for that date to expand the entries.
3. Right click on the referral line on the Journal tab and select Edit.
4. Tick the Online Booking box.
5. Click on the eBooking button and when the Choose and Book screen is displayed, select a relevant appointment, hospital, department, male/female staff mix etc.
6. Click on Request.
7. Click OK on Referral-Update.

The data in that consultation will be included in the referral, together with the list of data normally included in a referral message: Read Term for Referral Reason, all active problems, current medication (all acute therapy and repeat issues in last three months), allergies and intolerances (drug and non-drug), high priority 1 medical histories, the latest record for smoking, alcohol, height, weight, blood pressure.

**Note** - If you want to send an attachment with the edited referral booking, this will overwrite any original attachment sent when the referral booking was made.

If the referral has already been made online:

1. Select the patient in Consultation Manager.
2. Open the existing Consultation. Look on List - Referrals to find the date of the referral. Close any consultation that has opened for today (you will first have to uncheck the option Deselect the patient when closing a consultation, in Consultation - Options - Setup). Click on Consultation - List consultations. Find the consultation on the date of the referral. Select Consultation - Open Existing consultation. Click on the Consultation Line for that date to expand the entries.
3. Right click on the referral line on the Journal tab and select Edit.
4. Tick the Online Booking box.
5. The eBooking button is enabled and will connect to the eBooking system using the previously stored UBRN.
7. Click OK on Referral-Update and continue with your amendment.

Returning to the Choose and Book referral

Choose and Book can also be accessed either through the Patient Links tab on the Patient Record View in Consultation Manager (using the Links tab, select ‘eBooking Home’ from the drop down address list); or from Consultation Manager - Add - External Applications - Launch - Choose and Book.

This takes you to the Choose and Book home page from which patients can be found using the UBRN, NHS number or demographic details. This can be used to browse Choose and Book worklists but it is important to remember that one particular patient record is open. If details of other patients are viewed in Choose and Book, they must not be confused with the patient open in Consultation Manager.

Send an electronic referral letter on behalf of your GP by admin staff

To write a referral letter, the GP must have completed an appointment request, but not necessarily have made a booking of date and time. The GP should write the referral letter or they may have dictated the referral letter for the Practice Administrator to enter on their behalf.

Building the Referral Letter contents

1. Open the patient record in Vision Consultation Manager.
2. List - Referrals and find the referral item.
3. Right click on it, selecting **Edit**.

4. This will re-open the referral entry.

5. You may now create a letter in Vision in the conventional method (Click Letter, choose template, complete the letter). A red tick displays on the Letter button once the letter has been completed.

6. Click OK.

7. Drag the newly created letter from the Journal into Accompanying Documents on the Referral Message Digest.

8. Press **Send** on RMD to send the referral.
**Attaching Vision referrals in web-based Choose and Book**

It is best to use Choose and Book through Vision in the fully integrated way. This maintains the integrity of the Clinical Record and maximises confidentiality.

However, if web-based use of Choose and Book is unavoidable, then the following method is recommended for practices with local servers.

**Note** - this method is not suitable for practices using remote servers as Choose & Book will not find files on the remote server and so access to local drives will be needed.

1. **Preparation** - Create a folder on the server, on the global G: drive if there is one or else on the P: drive. Name the folder Referral Letters or something similar.

2. **Attaching** - The referral letter should be produced in Vision in the normal way and saved as usual. After saving in the normal way, and while still in Word, go to the File menu and use the Save As option to save a second copy of the file in the folder you have created for this purpose. This additional copy should be given a recognisable file name, for example, the patient’s surname, forename and date of birth, eg Smith John 20050116.

3. **Subsequently when using Choose and Book web based** , this separate copy of the letter can be attached using the Add Referral Letter button on the Referral Request summary page of Choose and Book.

4. **File management** - The temporary copy of the referral letter should be deleted once it is known that the attachment has been successfully lodged with Choose and Book. This minimises the risk to patient confidentiality and makes best use of disk space.
Access Choose and Book Home Page and select patient

The Vision system can be configured in a number of ways, and you can access Choose and Book through Vision without opening a patient consultation via External Applications. Otherwise the user can access Choose and Book direct via the Internet.

**Access CAB from Consultation Manager using External Applications**

You can access Choose and Book home page from **Consultation Manager – Add – External Applications – Launch – Choose and Book** without need to select patient first. This means access to C&B without a consultation or patient needing to be open.

Before launching for the first time, go into **Consultation Manager – Add – External Applications – Configure** and tick the **Choose and Book** box. Then use the Launch option.

**Access from Links tab in Consultation Manager**

Make sure your Patient Record view has a Links tab. If it does not, create one by right clicking on any of the tab headers (eg Journal, Therapy, Patient Select) and select Organise Tabs. Click on Add, and select Patient Links Browser. Move it up above the Guidelines tab. Click OK. On the Links tab, one of the options will be the e-Booking home page.

**If you have a Choose and Book icon on your desktop**

Double-click on the Choose and Book icon on the desktop to launch Choose and Book.
Choose and Book sometimes takes a little while to check your authentication, and then if you have one Choose and Book Business Function, the home page will open; if you have more than one Business Function you will go to the Role Selection screen.

You have now accessed Choose and Book.

**If you do NOT have a Choose and Book icon on your desktop**

1. Open Internet Explorer from the icon on your desktop.

2. In the Address Box of the internet screen, type in

   `https://nww.ebs.ncrs.nhs.uk/app-ebs`

   Choose and Book sometimes takes a little while to check your authentication, and then the Choose and Book Home Page will open showing you the Choose and Book Business Functions available to you.

You have now accessed Choose and Book using your smartcard.

If you have one Choose and Book Business Function, the home page will open; if you have more than one Business Function, you will go to the Role Selection screen.
NOTE: Your Smartcard must remain in the smartcard reader for the whole time that you are using the system. If you pull your Smartcard out of the reader, your session will end.

As a GP, within Choose and Book, you will have been given the Business Function of "Referring Clinician".
Select Referring Clinician from the pick list and click OK.

Checking the referral message in Mail Manager

Mail Manager is accessed from the Messaging menu from the Vision front menu. Mail Manager can be used to track referral messages for Choose and Book. In Control Panel (Management Tools menu) - Mail Maintenance, one user can be set up to be able to access the mail for all mailboxes (right click on user and select Add All).

To check a referral message has been sent successfully:

1. Go into Mail Manager.
2. Outgoing Mail messages are listed in Mail Manager within the originators mailbox. The display can be refreshed using an icon on the toolbar. You should find the referral under a C&B Referral message type. Different aspects of the message can be viewed by selecting the message in the list and using the tabs at the foot of the page.
3. Highlight the message, and click on the Audit tab. The progress of the message and acknowledgement of it is displayed in the Audit.
4. The Audit Trail should show a Received Acknowledgement (known as ACK) as the final step in a four-stage: Added to Message Queue, Message ready for Transmission, Message sent, Sent Awaiting Acknowledgement, Received Acknowledgement, Complete.
Figure 2: Within Mail Manager, Audit Trail of a successfully sent referral booking

Choose & Book referral messages will have an extra problems tab which gives details of the referral message problems.

No acknowledgement from Choose and Book

Sometimes, in Mail Manager, you may find an error has created no acknowledgement (NACK).

Find the referral under a C&B Referral message type. Highlight the message, and click on the Audit tab. The Audit Trail will show no Acknowledgement (known as NACK): Added to Message Queue, Message ready for Transmission, followed by an error message.

Processing errors

If the message has a status of Processing error, rather than Sent, this may arise if Choose and Book did not like the message for some reason, for example:

- you may have tried to send a file format which is not permitted (.doc, gif, .tif, .doctxt., xml, jpg are allowed).
- a single attachment may be more than 1 mB (1mB is maximum per attachment).
- the attachments may total more than 5 mB,
- the UBRN is invalid (an unlikely scenario).

The Audit Trail should give a clue as to the error, for example:

"Code - 0x80020009 Code meaning Exception occurred. Source = MCD Parser.MCD_PARSER. 1 Description = GP2GP transformation failed. Reason;"
Destination Error. The attachment 0005008.rtf exceeds the maximum size of 1024 kbytes.

Figure 3: An unsuccessful referral booking - the attachment was more than 1 mb
Figure 4: Another unsuccessful referral booking - this time the unique booking reference number is invalid - an unlikely scenario
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