What is the evidence on interventions to manage referral from primary to specialist non-emergency care? A systematic review and logic model synthesis

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Plain English summary

Interventions to manage referral

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People who go to see their doctor often need to be referred to other specialist services in hospital or other settings. There are many different ways of managing this process. Our study examined research which has been carried out and published in scientific journals to try to understand what works best and what factors will affect if and how interventions to manage the way that referrals are made will work.

We examined 290 relevant studies and found that four main types of interventions were used to try to improve how referrals are made. These were educating doctors; making changes to the way referrals are carried out; changing the health-care system; and interventions targeting patients. The studies we looked at emphasised how factors within individual doctors (such as their knowledge and attitudes), and factors related to patients (such as their attitudes and beliefs), could affect whether or not a referral was made. In addition, factors relating to a patient's condition and to the health-care environment could be influential. We used the factors mentioned by the research to develop a diagram (a logic model), which shows all of the things that will influence whether or not an intervention may make a difference to the way referrals are made. We have shown which types of intervention have stronger or weaker evidence for their use. The study thus provides a summary of evidence which can be used to help to decide which sort of interventions could be best in the NHS.

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