



PRACTICAL ADVOCACY WORKSHEET

Right to Choose Referral Checklist

Check the facts of the requested referral before escalating a refusal, delay or provider problem.

Patient choice is not simply "pick any provider". Check the referral route, exact service, provider status and clinical appropriateness before deciding where the blockage sits.

Basic eligibility questions

- ☐ This is an NHS referral pathway in England where patient choice may apply.
- ☐ The requested provider says it accepts this type of NHS referral.
- ☐ The provider's current referral instructions/form have been checked.
- ☐ The exact service required has been identified.
- ☐ Current age, geography and service criteria have been checked.
- ☐ Any clinical appropriateness concern has been separated from an administrative refusal.

Provider / service check

Requested provider	Exact service required	Accepts this NHS referral type?	Qualifying NHS contract / route checked?	Age / geography / clinical criteria	Current referral instructions / evidence



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Keep the referral history in one place so you can see exactly where it stopped.

Track the referral

Date	Action	Who	Reference / evidence	Status / response	Next step



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Classify the blockage and get a clear reason before deciding what to challenge.

What is actually stuck?

GP / referrer issue

Unclear refusal, referral not sent, clinical appropriateness concern or requested provider not discussed.

Provider issue

Referral not received, rejected, missing information, eligibility / contract question or provider process.

ICB / commissioning issue

Funding, contract or system-level interpretation of patient choice.

Waiting-list issue

Referral is valid and accepted; the issue is the wait rather than whether choice was offered.

Questions before escalating

- ☐ Please confirm the exact reason the requested referral has not been made / accepted.
- ☐ Which published guidance, contract criterion or policy is being relied upon?
- ☐ What complaint or review route is available if the issue remains unresolved?
- ☐ Is the reason clinical appropriateness, eligibility, contract status, referral route, missing information or something else?
- ☐ Who is the correct decision-maker if the issue is not controlled by the person replying?

Exact reason given / evidence relied on

Correct decision-maker / next route



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Record the escalation trail so a vague refusal does not become an endless loop.

Action log

Date	Action / question	Owner / organisation	Response due	Outcome / next step

What is still unresolved?

Next action
