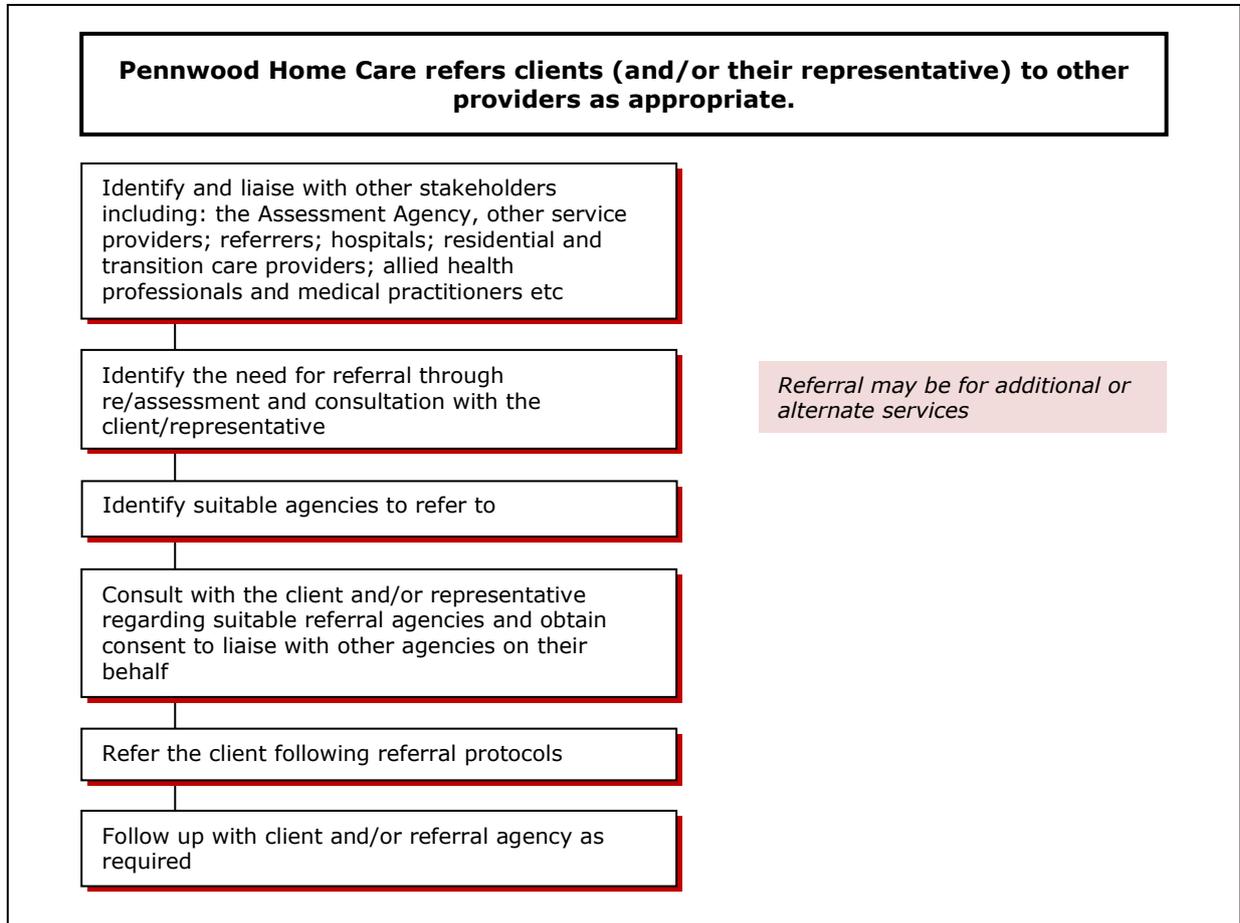




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## HC13- CLIENT REFERRAL



### FORMS AND RECORDS

Community Resources Brochures	Home Care Office
My Aged Care Referral Form	My Aged Care Website



## HC13.1 - Networking and Liaison with Other Providers

### 13.1.1 NETWORKING AND COORDINATION WITH OTHER AGENCIES

Pennwood Home Care is aware of services provided by other local organisations; this ensures open communication with them on an ongoing basis. The CE, Home Care Co-ordinator and other personnel network and liaise with other stakeholders including the Assessment Agency, other Home Care providers, referrers, hospitals, residential and transition care providers, allied health professionals, medical practitioners and others as relevant.

Networking and coordination of other services is promoted through newsletters, network meetings and telephone discussions; this is further described in **4.4 Program Planning and Community Involvement**.

Our organisation also maintains a range of brochures that outline other relevant community services and supports to assist in referrals (**see 4.6 Community Resources Information**).

## HC13.2 - Referral

The need for referral may be identified when the client first contacts Pennwood Home Care for services or after services are provided such as when support needs change.

### 13.2.1 IDENTIFYING THE NEED FOR REFERRAL

A referral to another service provider may be needed in the following circumstances:

- A new contact is ineligible for Home Care Packages
- We do not have the capacity to provide the required services due to a lack of appropriately skilled staff or funding to provide the required services
- The needs of the client change or
- The client requires specific assistance from another health provider.



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### 13.2.2 REFERRAL PROCESS FOR INELIGIBLE SERVICE CONTACT

Ineligible service contacts are provided with contact details of agencies that may be able to meet their stated needs and/or put in contact with My Aged Care.

If appropriate, our staff may contact the agency to confirm eligibility and to make an appointment for the person.

### 13.2.3 REFERRAL PROCESS FOR EXISTING CLIENTS

The referral process generally includes the following steps. The Home Care Co-ordinator, RN or EN:

- Liaises with the client and/or their representative and identifies the need for services from another agency
- Explains the need for a referral to another agency including the reasons for being unable to provide the required or requested services
- Identifies referral options and discusses these with the client
- Continues to provide services currently in place (as applicable)
- Obtains consent to liaise with other providers on behalf of the client
- Contacts other service providers that may be able to provide services and contacts them to discuss the services needs of the client
- Referral to other HCP / Residential providers is done through My Aged Care
- Referral to allied health is done via allied health providers' processes (ie. phone referral or referral form)
- Follows up with the client and/or provider referred to, to check on the outcome of the referral
- Provides any further information to the other provider as required
- Documents any relevant information in eHCP
- Note any new agencies that should be included in the community resources information held by our organisation or of changes to current information on agencies.

## HC13.3 - Monitoring Client Referral Processes

Client referral processes and systems are regularly audited as part of our audit program and staff, clients and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see [Community Calendar](#) and Section 5: Continuous Improvement).