Factsheet 4

Referral and handover

Referral

As with delegation processes, Hospital and Health Services should ensure that referral processes are clear and formal. Specific referral arrangements and expectations, tailored to local staffing and service model, should be discussed with the clinical supervisor and recorded in the Aboriginal and Torres Strait Islander Health Practitioner’s Practice Plan (refer Factsheet 3).

In making referrals, the referring health professional should ensure that the referral is:

- based upon clinical assessment of patient need
- with consideration to the patient’s cultural needs
- within the authority of the referring health professional
- within the scope of practice of the health professional receiving referral
- consistent with Hospital and Health Service policy
- supported by appropriate and sufficient communication and information about the patient and their treatment to enable continuing care (ANMC, 2007)

In accepting a referral, the Aboriginal and Torres Strait Islander Health Practitioner:

- agrees that the task is within their Scope of Practice
- acknowledges their degree of accountability for performing the task
- understands requirements to provide communication and information to the referring health professional

Handover

An Aboriginal and Torres Strait Islander Health Practitioner may handover a patient’s care to another health professional with the agreement of the clinical supervisor. A clear handover process should be formally documented to maximise patient safety and clinician accountability.