

<b>Policy Number</b>	YCG-POL-019
<b>Policy Name</b>	<b>Referral Management</b>
Version	1.0
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Review Date	January 2026
Approved By	Director / Principal OT

# REFERRAL MANAGEMENT POLICY

## 1. Purpose

This policy establishes Youcentric Care Group's framework for receiving, processing, triaging, and managing referrals for Occupational Therapy services. It ensures equitable, transparent, and clinically appropriate access to services while protecting participant privacy and clearly delineating the consent obligations of referring parties.

## 2. Scope

This policy applies to:

- All incoming referrals from any source
- All outgoing referrals to other providers
- All workers involved in referral intake and processing
- All clinical staff responsible for triage and acceptance decisions
- Administrative staff managing referral documentation

## 3. Legislative and Standards Context

This policy is informed by and compliant with:

- National Disability Insurance Scheme Act 2013 (Cth)
- NDIS (Provider Registration and Practice Standards) Rules 2018
- NDIS Practice Standards – Core Module: Provision of Supports
- NDIS Practice Standards – Supplementary Module: Support Coordination
- NDIS Code of Conduct
- Privacy Act 1988 (Cth) and Australian Privacy Principles
- Health Practitioner Regulation National Law
- AHPRA and Occupational Therapy Board of Australia requirements

## 4. Definitions

Term	Definition
<b>Referral</b>	A request for Youcentric to provide OT services to a participant
<b>Referrer</b>	The person or organisation submitting a referral on behalf of or with consent from a participant
<b>Triage</b>	Clinical assessment of referral urgency and appropriateness
<b>Waitlist</b>	A managed queue of accepted referrals awaiting service commencement
<b>Scope of Practice</b>	The services a clinician is competent and authorised to provide

## 5. Policy Statement

Youcentric Care Group is committed to providing transparent, equitable, and clinically appropriate access to Occupational Therapy services. All referrals will be processed in accordance with this policy, with decisions based on clinical appropriateness, organisational capacity, and alignment with the participant's NDIS plan and goals.

## 6. Referral Sources

Youcentric accepts referrals from the following sources:

### 6.1 Self-Referral

- NDIS participants may self-refer directly
- Family members, carers, or nominees with appropriate authority may refer on behalf of a participant

### 6.2 Third-Party Referrals

- Support Coordinators and Specialist Support Coordinators
- Local Area Coordinators (LACs)
- NDIA Planners
- General Practitioners and Medical Specialists
- Hospitals and discharge planners
- Other NDIS registered providers
- Allied health professionals
- Schools and educational institutions

## 7. Referrer Consent Obligations and Liability

**IMPORTANT:** This section establishes critical privacy and liability boundaries between Youcentric and referring parties.

### 7.1 Referrer's Obligation to Obtain Consent

Prior to submitting a referral to Youcentric Care Group, the referrer **must** have obtained informed consent from the participant (or their authorised representative) for:

1. The referral to be made to Youcentric Care Group
2. The sharing of the participant's personal and health information with Youcentric
3. The specific information being shared as part of the referral

### 7.2 Good Faith Acceptance

Youcentric Care Group accepts referrals in good faith on the **reasonable assumption** that the referring party has:

- Obtained appropriate consent from the participant before making the referral
- Complied with their own privacy and consent obligations under the Privacy Act 1988
- Lawfully collected and disclosed the participant's information

### 7.3 Liability Disclaimer

**Youcentric Care Group is not responsible for any breach of privacy, consent, or confidentiality obligations by the referring party.**

Specifically:

- If a referrer submits participant information without proper consent, the referrer bears full responsibility for that breach
- Youcentric is not liable for any privacy breach committed by the referrer prior to or during the referral submission
- The referrer indemnifies Youcentric against any claims arising from their failure to obtain proper consent

### 7.4 Referrer Declaration

All third-party referrers must complete the Referrer Consent Declaration on the Referral Form (FORM-007), confirming:

- They have obtained the participant's consent for this referral
- The participant has consented to the sharing of their information with Youcentric
- They understand Youcentric is not responsible for any consent breach on the referrer's part

## 7.5 Response to Consent Issues

If Youcentric becomes aware that consent was not properly obtained by the referrer:

1. Referral processing will be immediately paused
2. Youcentric will contact the participant directly to explain the situation
3. Consent will be sought directly from the participant to proceed
4. If consent is not provided, all information received will be securely destroyed
5. The incident will be documented and reported to the Director
6. Feedback may be provided to the referring organisation regarding their consent processes

## 8. Referral Information Requirements

A complete referral should include:

### 8.1 Essential Information (Required)

- Participant's full name and date of birth
- NDIS number
- Current NDIS plan dates (start and end)
- Plan management type (NDIA-managed, Plan-managed, Self-managed)
- Relevant funding category and available budget (if known)
- Contact details (phone, email, address)
- Primary contact person (if different from participant)
- Reason for referral / presenting concerns
- Referrer contact details

### 8.2 Desirable Information (If Available)

- Relevant medical history and diagnoses
- Previous OT or allied health reports
- Current supports and services in place
- Communication and accessibility needs
- Cultural or linguistic considerations
- NDIS plan goals relevant to OT
- Risk or safety information

## 9. Referral Processing

### 9.1 Receipt and Acknowledgment

- All referrals are logged in the Referral Register within 2 business days of receipt
- An acknowledgment is sent to the referrer within 2 business days
- Incomplete referrals are flagged and the referrer contacted for additional information

## 9.2 Eligibility Screening

Referrals are screened against the following criteria:

- Active NDIS plan with appropriate funding
- Service request within OT scope of practice
- Service location within Youcentric's geographic coverage area
- Referrer consent declaration completed (for third-party referrals)

## 9.3 Clinical Triage

A registered Occupational Therapist reviews all eligible referrals and assigns a priority category:

Priority	Criteria	Target Response
<b>URGENT</b>	Safety risk, equipment failure, hospital discharge, pressure injury risk, falls risk, imminent plan end	Contact within 2 business days
<b>HIGH</b>	Significant functional decline, new diagnosis, equipment review due, transition support needed	Contact within 5 business days
<b>ROUTINE</b>	Ongoing therapy, skill development, capacity building, general assessment	Contact within 10 business days

## 10. Acceptance Criteria

Referrals will be accepted where:

- The participant has an active NDIS plan with appropriate funding
- The service request is within the scope of Occupational Therapy practice
- Youcentric has clinicians with the relevant skills and experience
- The service location is within our geographic coverage
- Youcentric has capacity to provide timely services
- There are no unmanageable conflicts of interest

## 11. Decline Criteria and Process

### 11.1 Reasons for Declining

Referrals may be declined where:

- The service is outside the scope of Occupational Therapy
- No clinician has the required specialist expertise (e.g., specific paediatric skills, complex home modifications, driving assessment)
- The service location is outside our geographic coverage
- There is insufficient NDIS funding for the requested service
- Unmanageable safety risks exist that cannot be adequately mitigated
- There is an irreconcilable conflict of interest
- Organisational capacity cannot meet the participant's needs within a reasonable timeframe

## 11.2 Decline Process

When a referral is declined:

1. The participant and referrer are notified in writing within 5 business days
2. A clear, respectful explanation of the reason is provided
3. Alternative provider options or referral pathways are offered where possible
4. The decline is documented in the Referral Register
5. The participant is advised of their right to seek services elsewhere

## 12. Waitlist Management

Where referrals are accepted but services cannot commence immediately:

- Participants are placed on the waitlist in order of priority, then date of referral
- Participants are informed of their approximate waitlist position and expected wait time
- Waitlist status is communicated to participants at least monthly
- Priority is reviewed if circumstances change (e.g., clinical deterioration)
- Participants are advised they may seek services from other providers while waiting
- The waitlist is reviewed weekly by the Clinical Lead

## 13. Outgoing Referrals (Referral Out)

Youcentric may refer participants to other providers when:

- The service required is outside OT scope of practice
- Specialist expertise is required that Youcentric does not have
- The participant would benefit from additional allied health services
- Capacity constraints prevent timely service delivery

When making outgoing referrals:

1. Participant consent is obtained before sharing any information
2. A warm handover is facilitated where clinically appropriate
3. Relevant clinical information is shared with the participant's consent
4. The outgoing referral is documented in the participant's file and Referral Register

## 14. Conflict of Interest

Youcentric maintains transparent referral relationships:

- No financial incentives, commissions, or kickbacks are accepted or provided for referrals
- Referral decisions are based solely on participant needs and clinical appropriateness
- Any potential conflicts of interest are declared and managed in accordance with YCG-POL-008
- Participants are free to choose any provider and are not pressured to use specific services

## 15. Documentation Requirements

The following records are maintained:

- Referral Register (REG-010) - all incoming and outgoing referrals
- Referral Form (FORM-007) - completed for all referrals received
- Triage decisions and rationale
- Acceptance and decline records with reasons
- Waitlist management records
- Communication with participants and referrers

## 16. Responsibilities

Role	Responsibilities
<b>Director</b>	Policy approval, oversight of referral processes, capacity planning
<b>Clinical Lead / Senior OT</b>	Clinical triage, acceptance/decline decisions, waitlist review, scope of practice assessment
<b>Administration</b>	Referral receipt, logging, acknowledgment, incomplete referral follow-up, waitlist communication
<b>All Workers</b>	Awareness of referral pathways, directing enquiries appropriately, obtaining consent for outgoing referrals

## 17. Related Documents

- YCG-POL-011 Privacy and Confidentiality
- YCG-POL-014 Informed Consent and Decision Making
- YCG-POL-015 Service Access, Assessment and Planning
- YCG-POL-008 Worker Code of Conduct
- FORM-007 Referral Form
- REG-010 Referral Register

## 18. Review

This policy will be reviewed annually or earlier if required due to legislative changes, organisational changes, or identified improvements. The review will consider referral data, processing times, decline rates, and feedback from participants and referrers.

## Version History

Version	Date	Author	Changes
1.0	January 2025	Director	Initial policy creation