

Successful referral to clinical and non-clinical services: Tips for GPs

Engaging other services and healthcare providers is an important part of providing high quality care to children and families. Continuity and coordination of care can be enhanced through timely and appropriate referrals, whether they be to a Better Access service provider, a GP with a special interest, a child and youth mental health service (CAMHS), or a non-government organisation (NGO) providing a social and family support service. These services can also provide a 'team' approach to care, returning support and expertise to the GP.

This resource has been developed to help GPs to provide practical guidance related to key areas of the referral process. To learn more, visit the e-learning course, [A GP Framework for Child Mental Health Assessment \(5-12 years\)](#).

Before initiating a referral, consider:

1. Are the family and child ready for a referral, in terms of timing and stability of their situation?
2. What are the family's priorities? Consider both immediate and secondary concerns.
3. What services have previously been/are currently being used by the family, and what has been the outcome? Note any positive and/or negative experiences that may act as incentives/barriers to future referrals (see the [Emerging Minds Pathways of Care resource](#) for examples).
4. Is a single service or integrated service required (clinical and/or non-clinical combination)?

5. Will the referral/s meet the biopsychosocial needs of both the child and family?
6. Is there an appropriate service available? Will they accept the referral?
7. Does the family have sufficient resources (e.g. money, transport, childcare, commitment, self-efficacy) to access services? This is particularly important to consider in the case of self-referrals.

Remember that referrals may need to take place in stages. That is, multiple services may be required over a period of time depending on the needs of that family.



When making a referral:

1. Follow the referral guidelines and processes for the selected service, e.g. complete a Mental Health Treatment Plan (MHTP) for Better Access services. The [General Practice Mental Health Standards Collaboration](#) (GPMHSC) has basic templates that can be imported into your practice software, as well as a broad [communication framework](#).
2. Use the appropriate referral form/letter and clearly outline the reason and goals of the referral along with identifying, clinical and contact information, and current medication list.
Consider the clinical question to be answered by the service, or what assistance you're expecting they may be able to provide to the child and/or family.
3. Use a clinical software program to generate referrals that automatically populate a health summary. Only include information that is clinically/socially relevant to the current problem.
4. Alert the family that there may be out-of-pocket expenses. Encourage them to research the service and determine if it is suitable.
5. Ensure the referral process is in accordance with the [RACGP Standards for general practice](#), especially in regard to Criterion GP2.3 – Engaging with other services and Criterion C1.3 – Informed patient decisions. These criteria highlight informed consent, care coordination, referral processes, transfer of information, and referral follow up.
6. If access to a service is delayed, provide ongoing supportive care (review consultations) and set up a 'safety net' plan for what to do if things get worse or new issues arise. In addition, you might like to provide information about online or telephone support services (e.g. [Parentline](#), [Raising Children Network](#)) as an interim measure, or encourage families to make use of their 'informal' network of support.
7. Families are often eager to get your advice and trust you about referrals. Remind them to let you know if the services aren't the right fit for them or things don't work out, so you can review and consider alternatives.

Developing your referral pathways and resource directory

Up-to-date knowledge of the range of services in your region and an understanding of different referral arrangements for public and private providers will help you to provide the best collaborative care. In addition to the tips below, the [Pathways of Care resource](#) can help you to explore and capture the services in your area. Here are some ideas that may help you to improve your referral pathways.

Establish working relationships and good communication with service providers in your region.

Invite service providers to present at your practice team meetings.

When appropriate, use **Multidisciplinary Case Conferencing (MBS items)** to enhance teamwork.

Find out the requirements for an appropriate and effective referral for each service provider.

If you don't already have one, **set up a 'contact list' in your medical records** software program (i.e. Best Practice/Medical Director) of non-clinical and clinical services.

- Careful use of headings and comments regarding each provider's referral requirements will be worth the effort and save time in the future.
- See if your Practice Manager can assist with these tasks.

When developing a service directory (or 'contact list'):

- use the collective knowledge of your practice colleagues; and
- gather information from a Google search for 'community service directory' in your area. For example, [My Community Directory](#) lets users search for social, health and community information via postcode. Another useful directory is [AskIzzy](#).

Research other websites, e.g. state and local government, local health and hospital services. Some states have a centralised referral hub (e.g. QLD: [Family and Child Connect](#); NSW: [Family Referral Service](#)).

Contact your Primary Health Network (PHN) or General Practice Liaison Officer (GPLO) for service information.

Develop a contact list of local service providers to help patients choose the one that best suits their needs.