

## **Referral Management**

**CP3 Toolkit: Planned Care** 

The activities below describe the process to manage referrals. They were adapted from a <u>September 21, 2016 presentation</u> by Carolyn Shepherd, formerly of Clinica Family Health.

- 1. Define goals of referral management
  - Assume accountability
  - Provide patient support
  - Build relationships and agreements
  - Develop connectivity
- 2. Select and train staff to track and manage referrals
  - Select referral coordinator
  - Develop referral tracking system
  - Help patients identify sources of service and make appointments
  - Ensures transfer of information
  - Design standardized referral entry in EHR
  - Track referrals
  - Work with CMO to develop outside referral guidelines
- 3. Develop workflows to optimize internal referrals
- 4. Reach out to specialists, hospitals and community agencies
  - Primary care leader role
  - Address specialist's legitimate concerns
  - Agreements in writing or incorporated into e-referral systems.
- 5. Create workflows to ensure the referral loop gets closed
  - Provider
  - Patient and family
- 6. Develop standard ways of exchanging information
  - Streamline data entry
  - Address complaints from both PCPs and specialists focus on communication
  - Standardized formats increase provider satisfaction
    - Shared EMR
    - o E-referral
    - Structured referral forms



- 7. Support patients
  - Review patient's intentions
  - Help patients identify sources of service
  - Help make appointments
  - Track referrals—help resolve problems
  - Ensure transfer of information
- 8. Communicate test results and care plans to patients/families