

## **Electronic Referrals**

Illawarra Shoalhaven Local Health District Engage Outpatient





"I pay my respects and honour to their Elders past, present and emerging and implicitly acknowledge their continuing connections to their ancestral lands."







# Acknowledgement of Country

# Agenda

- Acknowledgment of Country
- Housekeeping
- Presenters
- Background to eReferrals and Engage Outpatients
- Overview eReferral solution (eRMS)
- HealthLink SmartForms
- eRMS Notifications
- Resources for GPs
- Questions



# **Presenters/Panel**

- Amy Bloomfield– eHealth NSW
- April Gosses eHealth NSW
- David Jeffery ISLHD (Services Available)
- Kay Duckinson ISLHD (Services Available)
- Jean-Christophe Meunier Healthlink
- Rohan McKnight Coordinare
- Sid Ramani– eHealth NSW



## **Overview: Engage Outpatients Program**









#### Sponsorship:

eHealth NSW is partnering with the Ministry of Health to develop a state-wide digital Engage Outpatients solution, eReferrals.



### Target group:

The eReferrals prototype aims to deliver referrals fron the GP to the outpatient hospital clinician more efficiently and securely.

# Benefits





- Visibility of local services and specialists with the service practitioner directory
- Secure transmission of patient information
- Real-Time Transmission from GPs with Acknowledgement no lost referrals or delays
- Notification of referral status with electronic updates on referral receipt and triage outcome
- Fully integrated and supported by all leading GP software vendors
  - Auto-population of patient information to save time and improve standardisation
  - » Copies of referrals auto-save and store within GP clinical software
  - » Electronically attach pathology or diagnostic results to support the referral
- Eliminates error-prone, incomplete and expensive manual referral process
- Support faster communication and continuity of care between healthcare providers
- Support fast intervention & better health outcomes



External Referrer

Functionality

Patient

eHealth NSW

# **Engage Outpatients**

# eReferral Management System (eRMS)

**eReferrals Overview** 





# **Initial Services**



- ISLHD Aged Care Clinics (Geriatric)
- ISLHD Diabetes Service
- Wollongong and Shellharbour Hospitals Gastroenterology (and Hepatology) Clinics
- ISLHD Renal Service
- Wollongong and Shellharbour Hospitals Respiratory Medicine Clinic
- ISLHD Antenatal Clinics
- Wollongong Hospital Gynaecology Clinic.





# E-REFERRAL DEMONSTRATION – BEST PRACTICE



## Step 1: Accessing HealthLink SmartForms (eReferrals)

To access the forms within your Best Practice software...

First, search for the patient and open their electronic medical record.

Then click the HealthLink icon HL from the quick launch bar to launch the HealthLink home page.

Click View from the menu and select HealthLink Forms.

D

And then click the **New Form** button to launch the **HealthLink home page**.

or







### Step 2: Launching a new form

Now you're on the HealthLink home page...

Here you'll find a list of available services to refer patients.

Within the Referred Services section, Click on the link named Health Outpatient Referrals followed by the name of the LHD you wish to send to.

(e.g. Health Outpatient Referrals – Western Sydney LHD)

To launch the smart form, **NSW Health** Outpatient Referrals require you to then:

- select a specific service and
- facility (only if there's multiple facilities for that service)



Then click **Continue** to launch the form.

For more information on your Local Health District (LHD), go to: https://health.nsw.gov.au/ereferral

ake a reierrai	
Search a Private Specialist or Allie	d Health Provider to Refer Patient
Type individual / practice name, or specialty then enter	Search Help Clear State Tasmania
Referred Services	
Aged Care	dical Certificate for Insurance Claim
Referral	
Me	
Cardiometabolic Health in Psychosis	NSW Health Outpatient Referrals – [LHD Name]
Certificate of Capacity	Onli ne Medical Certificate
Community Health	Ou patient and Community Referral Form
	t
Fitness to Drive Assessment	Rad jology Referrals
Fillness to Drive Assessment	nau totogy neretrais



Now you've loaded the form to complete and submit.

**The SmartForm layout** provides a consistent, easy-to-use tabular structure on the left, with the main action window on the right.

You'll notice SmartForms are **responsive**: They will pre-populate all available patient and referrer data and contain logic to request more specific patient information based on your selections.

**Mandatory Fields** must be completed prior to submitting the SmartForm and are each highlighted with a red asterisk.

**Note:** Please use HealthPathways where available to identify LHD specific referral information.

NSW	[Service]			Submi	Preview	Park	
Requested Information General Surgery	Referred To*	Specialist - u	nnamed referral		Ŧ		
Attachments / Hocorts	Patients presenting at NSW public hospitals can choose patient. Public hospitals do not control referral pathways further information and will be asked to make an election require a named referral to a medical specialist if they ch	o be treated as a public o deny access to free p when they present to th pose to be a private pat	c (hospital funde public hospital so ne outpatient clir tient	d) or private (Medicare ervices. Patients will be nic for their appointment	bulk-billed) provided with Patients will		
	Referral Date*	13/08/2023					
Medications, Allergies, Alerts	Referral Type*	New					
		O Update	d				
		O Continu	ation				
Medical, Social and Family History	Referral Period*	12 months					
	Referral Priority	Non-Urgent	(365 days) 🗸				
Patient Information	Patient available for appointment at short notice	O Yes	O No				
	Is patient suitable for virtual care?	O Yes	O No	O Unsure			
	Health insurance/third party compensable?	O Yes	No				
Referrer Information	]	220					
	HealthPathways						

Requested Information	Patient Information	
	Date of birth*	IHI
	17/12/1941	8003602345688835
Attachments / Reports	Medicare/DVA Eligible* Yes O No	
	Medicare number*	Medicare expiry
	6288253442 2	
Medications, Allergies,	DVA number	Pension number
Alerts	QX901226	
	Private health fund name	Patient membership number
Medical, Social and Family History	Safety net number	Country of birth
	Name*	
Patient Information	MICKEY Disney HEATLEY	
	Gender*	Patient's indigenous status*
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Male ~	Neither Aboriginal nor Torres Strait Islander origin 🗸
Peferrer Information		

It will also display a warning for some information taken from your Practice Management Software that needs reviewing.

For example, if a contact phone number does not include an area code.

If you need more context on the questions, you can click on the **information icons**.

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i uning motory	Name*		
	MICKEY Disney HEATLEY	Y	
Patient Information	Gender*	Patient's indigenous status*	
-	Male 🗸	Neither Aboriginal nor Torres Strait Islander origin 🗸	
	Residential Address		
Referrer Information	> 95 Ditt Street Apartment S	Suday NSW 2000	
	V 35 Fill Suber, Aparament, 5	Syuney, NSW, 2000	
	Postal Address		
	Contact Details (Select pre	referred phone contact)	
	At least one phone number must	st be provided. Please indicate the best contact phone number for the patient.	
	Phone number must be nu	umeric only with no spaces. An area code must be provided for all landline numbers.	
	O Work 023	34567890 O Home 98765432	
	O Mobile 045	56789098 O Other	

medications specified	Referral Type*	New	
ns specified warnings specified		O Updated	
listen		O Continuation	
ory specified	Referral Period*	12 months 🕶	
	Referral Priority	Information	×
nformation ATLEY 5688835	Patient available for appointment at short notice Is patient suitable for virtual care?	<ul> <li>This may include telephone consultation, video conference consultation, or remote monitoring. Appropriateness will be determined by the receiving outpatient clinic.</li> </ul>	
Information			
lle	As outlined in the NSW Health (Adult) HealthPathway link triaging processes.	0	k /ith
	Reason for referral * Browse for Consultation Notes		
	Please provide relevant medical history, medical manager	nent, examination findings and investigation results	
		N	
	Additional referrar mornation (useful for triaging the	rerentary	
	Please provide details of trialled medical manadement an	o any additional information that may influence referral friade	

#### **Reason for referral**

In some forms there may be drop down to select the reason for referral conditions.

**Tip:** You can start typing the condition name in the search box to narrow the list down.

Also, there will always be an option 'Other condition' if the condition you are looking for is not noted in the selection list.

#### HealthPathways Please refer to HealthPathways linked here to assist you with completing this referral. Please select Reason for referral\* . Considerations / risks / barriers to access Please select Does the patient have primary carer / guardian?\* Cirrhosis (suspected or known) Concern for colorectal cancer (rectal bleeding or positive faecal occult blood test) Interpreter required?\* Hepatocellular cancer (suspected or known) or liver lesion Inflammatory bowel disease or irritable bowel syndrome (suspected or known) Special needs/reasonable adjustments required for disability? Iron deficiency Liver dysfunction Are there any considerations, risks or barriers to accessing the Upper gastrointestinal dysfunction service? Other gastroenterological condition

I acknowledge that the patient, or appropriate guardian, has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. Patient consents to being contacted via SMS, phone, email or letter for this referral (subject to local practices).

Patient consent\*

#### Attachments

- The **Attachments / Reports** tab will give you access to all the supporting documents that you may wish to attach to the form.
- You can select any item from the **table** showing you patient medical records captured from the **last six months**.

Or you can **browse for files**...

- stored in your Practice Management Software by clicking the **Browse for Patient Document** button .
  - Note: Make sure to update the date parameters if you want to see files that are older than 6 months.
- 0
- **Or** in your local computer's file system by clicking the **Browse for Local File** button.

Requested Information	Diagnostic Rep	orts / Patient Docum	ents	Browse for Partient Docume	nt Brov	vse for Local	File	
	Attach file from 8 Attach file from 6	MR supports: gif, htm Computer supports file	I, jpeg, doc, docx, pdf s that end in types: do	if, bd, rtf, tiff ioc, docx, gif, htm, html, jpeg, jpg, p	df, rtf, tif, tiff, tx	t		
Attachments / Reports	า์ 🗖 🗖			Caution. larger attachments	may take signifi	icant time to	preview	
+			tame	Comments	Type	SIZE	-	
		File_123			rtr	80 KB	0	
Medications, Allergies,	01/10/20	J21 File_456			rtr	8 KB		
PUBITS	01/11/20	21 File_789			rtf	90 KB		
gnostic Reports / Patien	t Documents		Browse for Pat	tient Document Brows	e for L <u>o</u> cal Fil	e		
gnostic Reports / Patien ase attach any relevant pa relevant medical symma mation will be visibi Atta	It Documents atient information ries) This informa ich File	(for example allied	Browse for Pat health assessme our natient's asses	tient Document Brows Ints, would care details, med ssment and service provision	e for L <u>o</u> cal Fil ication sumn Clinical	e naries		
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gnostic Reports / Patien ase attach any relevant pa relevant medical summar mation will be visibl Atta ch file from EMR su ch file from Comput Date 08/07/2021	At Documents atient information inex This informa inch File inte from 08/01/2 Date 08/07/2021 09/10/2019	(for example allied tion will sunnot vo 019 III File_One File_Two	Browse for Pgt health assessme aur nation's asses Date to 08/0 ame	Iient Document Brows ints, worth care details, med ssment and service provision 7/2021  Si Comments Aged Care Referral Aged Care Referral	e for Lgcal Fil ication summ Cilinical earch Att	e	Cancel Size 43 KB 52 KB	]
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Then click through the remaining Tabs on the left to ensure all the pre-populated patient information has been either selected, or de-selected, as appropriate to submit to the service provider.

All these features ensure you're providing a quality, and compliant submission every time, on behalf of your patients.

NSW	Cardiolo	gy Clinic					
Requested Information 🛕 Cardiology Clinic	0	To help reci	pients assess the patient's n e generic name, strength, br	nedications, p and name (w	lease provid	e the medication details in the Details colu t) and form. You can update fields by clicki	mn ng on
Attachments / Reports lo reports selected lo files attached	Long Ter	m Medicatio	ns 🛈				
	Date -	-	Details	Dose	Units	Instructions	4
Adications, Allergies,		Vita-D 100	01U Gel Caps			1 Capsule Once a week on an empty stomach As directed p.r.n	E
lerts		Ibuprofen 100mg Tablet				1 Tablet Twice a day with meals	
lo medications specified medical warnings specified		Betnovate	0.1% Cream			1 Application In the morning before meals As directed BP 1.8.6.776 VVT	
Medical, Social and Family	•	Ventolin CFC-Free 100mcg/dose Inhaler				2 puffs Inhalation Twice a day As directed	
listory ledical history specified		Panadol 500mg Tablet				1 Tablet Every 4 hours with meals As directed	
		Panadol 5	00mg Tablet			1 Tablet Four times a day with meals Stat	
Patient Information		Omnitest i	Plus Test Strip			15 Dose In the morning with meals As directed	
2X901226 19/09/1954	Other Me	dications 🛙	Browse for More Medic	ations			
Referrer Information	Date -		Details	Dose	Units	Instructions	4
leferrer's name	No reco	ords found.					
lo Different Regular GP	Medical	Warnings					
		Date -	Descrip	tion		Comments	
	23	18/12/2014	Penicillin			Rash	

No reports selected No files attached	889843		medical Registration M	
	HPI-I		HPI-O	
Madications, Allargian	8003611566681627		123456	
Alerts	Name			
7 long term medications specified No medications specified	Full name	Sam Entwistle	8	
2 medical warnings specified	cal warnings specified    Sam Entwistle			
Medical, Social and Family History	Practice name			
Medical history specified	Millstone Family Practice			
	Practice Address			
Patient Information	+ 155 George Street, Gall	eria, Sydney, NSV	V. 2000	
CX801226 20/09/1954	Practice telephone*		Practice fax	
	03 9 358 0116		03 9 4433456	
Referrer Information	Email			
Referrer's name	zongjun@gmail.com			
No Different Regular GP	EDI*			
	ma65test			

## Step 4: **Previewing, Submitting** and Parking

#### Previewing



You can verify that the form has been completed correctly by clicking **Preview** allowing you to review the details before submitting.

Whether you click **Preview** or **Submit**, if a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it.

	[Service]		Submit Freview Fark Help V	
Requested Information	Medical Practitioner Information Medicare Provider Number* 0000000A	Medical Registration Number 123456	•	
Attachments / Reports	11914	123456789098765		
	Name	i Nama III		
	Full name	1.144000002		
			Preview, not submitted copy	
			Submit	
General	Surgery			
			NSW Health	
[Service]			NSW	
Patient: MICKEY F 53532221	IEATLEY, 81yrs, M, DOB 1	7/12/1941, PH: 0401 201 2011, Wrk 03	i 9 23423221, Hme 03 9 🖌	
Residential addres	s: 95 Pitt Street, Apartmen	t, Sydney, NSW 2000		
Postal address: 96	600 Pitt Street, Apartment, S	ydney, NSW 2000		
Referred by: Sam	Entwistle, Millstone Family I	Practice, Prov. No. 889843, HPI-O 123	456, HPI-I 8003611566681627,	
PH 03 9 358 0116.	FAX 03 9 4433456			
Clinical Referra	al Information			
Clinical Referra	al Information	Specialist - unnamed referr	al	
Clinical Referra Referred To: Patients presenting (Medicare bulk-bili hospital services. P they present to the specialist if they cho	al Information at NSW public hospitals ca d) patient. Public hospitals atients will be provided with outpatient clinic for their ap pose to be a private patient	Specialist - unnamed referr n choose to be treated as a public (hos do not control referral pathways to den further information and will be asked t pointment. Patients will require a name	tal spital funded) or private y access to free public o make an election when d referral to a medical	
Clinical Referra Referred To: Patients presenting (Medicare bulk-bille hospital services. P they present to the specialist if they chi Referral Date:	al Information at NSW public hospitals ca d) patient. Public hospitals attents will be provided with outpatient clinic for their ap pose to be a private patient	Specialist - unnamed referr n choose to be treated as a public (hos do not control referral pathways to den further information and will be asked to pointment. Patients will require a name 	tal spital funded) or private y access to free public to make an election when di referral to a medical	
Clinical Referra Referred To: Patients presenting (Medicare bulk-bille hospital services. P they present to the specialist if they cho Referral Date: Referral Type:	al Information at NSW public hospitals ca d) patient. Public hospitals atients will be provided with outpatient clinic for their app pose to be a private patient	Specialist - unnamed referr n choose to be treated as a public (hos do not control referral pathways to den further information and will be asked t pointment. Patients will require a name 	tal spital funded) or private y access to free public to make an election when d referral to a medical	

NSW Health	Gastroenterology & Liver Clinics		Submit Preview
Requested Information A Gastroenterology & Liver Clinics	Patient consent is a required field     Reason for referral is a required field     Referred To is a required field     Triage category is a required field		B
Attachments / Reports No reports selected No files attached	Referred To* Patients presenting at NSW public hospitals can choose to be tre	Please Select	
Medications, Allergies, Alerts 4 long term medications specified	patient. Public hospitals do not control referral pathways to deny further information and will be asked to make an election when the require a named referral to a medical specialist if they choose to the second seco	access to free public hospital services. Patients will be provided with ey present to the outpatient clinic for their appointment. Patients will be a private patient	
No medications specified 1 medical warning specified	Referral date* Referral type*	17/10/2023 New	
Medical, Social and Family History		O Updated	

## Step 4: Previewing, Submitting and Parking

#### Submitting

- When you are ready to send your form, click **Submit**.
- This will safely and securely send the form electronically via HealthLink, and you will see a copy of the completed form with a **date stamp**.

## A copy of the submitted form is saved directly to the patient file.



If you'd like to provide the patient with a copy, you can left-click the **Print** button or right-click anywhere on the submitted form and choose Print.

NSW Healt	:h [Service]		Submit Preview	Park Help
Requested Information	Medical Practitioner Information Medicare Provider Number* 889843	Medical Registration Number	C	
Attachments / Reports	HPI-I 8003611566681627 Name	HPLO 123456		
Medications, Allergies, Alerts	Full name Sam Ent	wistle		
Medical, Social and Family History	Practice name Millstone Family Practice Practice Address			
Patient Information	↓ 155 George Street, Galleria, Sydne	y, NSW, 2000		

Sensitive: Personal	
[Service]	NSW Health
Patient: MICKEY HEATLEY, 81yr	rs, M, DOB 17/12/1941, PH: 0401 201 2011, Wrk 03 9 23423221
Residential address: 95 Pitt Stree	et, Apartment, Sydney, NSW 2000
Postal address: 9600 Pitt Street, .	Apartment, Sydney, NSW 2000
Referred by: Sam Entwistle, Millst PH 03 9 358 0116, FAX 03 9 4433	tone Family Practice, Prov. No. 889843, HPI-O 123456, HPI-I 8003611566681627, 456
Clinical Referral Informatio	'n
Referred To:	Specialist - unnamed referral
	beenitele can observe to be treated on a public (beenitel funded) or private
Patients presenting at NSW public (Medicare bulk-billed) patient. Pub hospital services. Patients will be p they present to the outpatient clinic specialist if they choose to be a pri	In oppinals can choose to be treated as a point (hospital tarbed) of phrate lic hospitals do not control referral pathways to deny access to free public provided with further information and will be asked to make an election when c for their appointment. Patients will require a named referral to a medical ivate patient
Patients presenting at NSW public (Medicare bulk-billed) patient. Pub hospital services. Patients will be p they present to the outpatient clinic specialist if they choose to be a pri Referral Date:	Indepined call robust to be related as a path ways to deny access to free public bic hospitals do not control referral pathways to deny access to free public provided with further information and will be asked to make an election when c for their appointment. Patients will require a named referral to a medical ivate patient 14/08/2023

## Step 4: Previewing, Submitting and Parking

Parking

And if you need more information to complete the form, you can **Park** the form to save what you've done so far and come back to it later.

ISW Healt	[Service]		Submit	Preview	Park	Help~
Requested Information	Form parked success attached when resun	sfully. Please note that attachments sele ning the parked form.	ected from your P	°C need to b	e re-	F
Attachments / Reports	Recipient Referral number*	Referral creation date* 14/08/2023 13:24 NZST				
ledications, Allergies, Verts	Facility* Western Sydney Local Health Distri	ct v				
ledical, Social and amily History	Medical Practitioner Information Medicare Provider Number*	n Medical Registration Number				
atient Information	HPI-I 8003611566681627	HPI-O 123456				
ferrer Information	Name Full name Sam	Entwistle				
	► Sam Entwistle					
	Millstone Family Practice					
	Practice Address					

## Step 5: Accessing parked and auto-saved forms

- To access parked or auto-saved forms, from the patient's record, select **HealthLink Forms** under the **View** menu.
- From the available list, **double-click on the Parked** or **AutoSaved** form you would like to open.

**Note:** when returning to a parked or auto-saved form, due to security policy, any previously added attachments will need to be re-added.

C You and

You can also use this area to see **completed** and **deleted** forms.





## Step 6: Accessing submitted forms



- To view a submitted or saved/parked messages in the Correspondence Out section, highlight the message,
- Then click **View** and it will display the form.

File Open Request Clinical View Utilities My Health Record Bp Comms Hel	p			
II 🖲 🚱 🗊 🔒 📓 🖉 🤹 📓 🕥 🕅	a a a a a a a a a a a a a a a a a a a	V Jump Open		
Name: Patty Smith D.O.B.: 25/08/1954	Age: 69 yrs Bith Sex: Female film 22 still	Pinalse viat My Health Record		r
Address: 1 Baggot Drive Hoppers Operating 3029 Phone:	Final			
Madeate No: 000000000.1 Becard No:	Comment			
Person No.: Person No.:	Alexand	Bits sends		
Coccession. Tobacco:	Active.	Bierpora. Britay.		No photo
blood uroup: breastreeding, raity:	riegnant. No	Advance Lare Lifective:		
Allergies / Adverse Drug Reactions: Reactions Notifications:			Fact Sheets Preventive Health Actions	Reminders
Nem Peacton Severity Type Presenter Land D Prevention Land D Preve	Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Peson Pe	લ જ		
There are unchecked report	s for this patient			
Expand Collapse	Add Wew Delete Print	Record Note Previous Next > Back to list		
R- R Mrs Patty Party Smith				
		(1911)		
Today s notes		Print		
- Past visits	Form sent on 21/08/2023 10:29 AEST			
- Gurrent Rx	Sensitive: Personal			
- 🦉 Past history	Ronal Medicine	a18/a		
Active	Renal Medicine	Health		
		Local Health District		
	Patient: Patty Smith, 68yrs, F, DOB 25/08/1954			
Immunisations	Residential address: 1 Baggot Drive, Hoppers Crossin	g, VIC 3029		
A Investigation reports	Postal address: same as residential address			
Correspondence In	Referred by: Best Practice, HealthLink Townsville, Prov	No. 0000000Y, Reg. No. 1234557890, HPI-O		
Correspondence Out	Beferral date: 21/08/2022 10:20 AEST			
> 20/10/2022 warminers Warman Marry Hornital	Referrar date: 21/002023 10:24 ALST			
	Olisiaal Defensel is fermation			
- 23/11/2022 newmama Transport for NSW	Clinical Referral Information			
- P 21/06/2023 shchosm Sydney Local Health District Services	Referred To	Renal Medicine Convine		
- D 21/08/2023 shdhaem Sydney Local Health District Services	Referral Date	31/08/3023		
- D 12/09/2023 acthepic Canberra Health Services	Referral Continuation	New		
28/09/2023 shohaam Sudaw Local Health Distort Sensore	Poterni Poriot	13 months		
Construction of the second second second	Interpreter Remited	Var		
Past prescriptions	Breferred Language	3535555		
Observations	Companyable Status	Not applicable		
- Family/Social history		Text approache		
Cinical images				
Obstetric history	Reason for Patient Referral			
Certical economics	New diagnosis tollowing hospital presentation whilst ov	erseas		
8	Consider for telehealth and/or virtual care consultation:	Yes		
Enhanced Primary Care	Special Needs/ Reasonable Adjustments Required for Disability:	No		
	Does the Patient Have a Carer/ Support Person?	No		
	Measurement Details			
	Date Code Value	Date Code Value		
	24/00/2022 11/00/ 4/27	21/09/2022 814 22.2		

## Step 7: What happens after a referral has been made?

- NSW Health Outpatients will respond with a Status Message regarding the Referral Acceptance or Referral Rejection with reasons.
- These Status Messages will be received back into your Practice Software using the same workflows when receiving Incoming Reports and Results, and Other correspondence like Discharge Summaries.

#### Viewing incoming reports (Using the shortcut)



From the main screen within Best Practice, click the **Inbox** shortcut

This will take the **logged-on provider** to **their inbox** and show their incoming correspondence.

This is the preferred way. They can then match and save back to patient's file.

1		A
File Clinical Management	Utilities View Setup Help	a 🤋 🖗



## Step 7: What happens after a referral has been made?

Viewing incoming reports (via the View menu)

To view **all** incoming reports that have been received **into your practice...** 

Click View from the menu

Select Inbox or Incoming reports

Here you can open and view incoming reports and allocate them to other users or to the patient.

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Pharmaceutical Products Explorer	
Contacts	F11
Patients	F10
Account holders	
Patient Education material	
Fact Sheets	
Travel medicine	
NPS RADAR Documents	
My Health Record Audit	
eReferrals	
Strata Health PRISM	
HealthLink Forms	
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Investigation reports	
Incoming Email	
Practice Email	
Contact notes	
Appointment book	F12
Waiting room C	Ctrl+F12
Previous Patients S	Shift+F2

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14/08/2023 Ca	men Actoria	Notification	Best Practice	Camen Actorh	Dr Best Practice	HealthLink Townsville	Yes	SA Health
14/08/2023 Fra	inces Akaata	LETTER - eRef undate: Unspecified. Ho	initial in the HomBest Practice	Frances Akaata	Dr Best Practice	HealthLink Townsville	Yes	Paul Rennett
08/08/2023 Jok	hann Brunneel	LETTER - eRef update: Unspecified, Ear	Nose and Thit Best Practice	Johann Bruneel	Dr Best Practice	HeathLink Townsville	Yes	Andrew Dodde
8/08/2023 Joh	hann Brumeel	LETTER - eRef update: Urgent (appoints	rent within 30 di Best Practice	Johann Brigneel	Dr Best Practice	HeathLink Townsville	Yes	Andrew Dodds
/08/2023 Ke	erthi Engage	Notification	Bast Practice	Keethi Engage	Dr Beat Practice	HeathLark Townsville	Yee	NSW Heath
1/08/2023 Ke	erthi Engage	Notification	Best Practice	Keerthi Engage	Dr Best Practice	HeathLink Townsville	Yes	NSW Health
11/08/2023 Ke	erthi Engage	Notification	Best Practice	Keerthi Engage	Dr Best Practice	HealthLink Townsville	Yes	NSW Health
11/08/2023 Ke	erthi Engage	Notification	Best Practice	Keethi Engage	Dr Best Practice	HeathLink Townsville	Yes	NSW Heath
11/08/2023 Op	timusprime Engage	Notification	Best Practice		Dr Best Practice	HeathLink Townsville	Yes	NSW Heath
11/08/2023 Op	timusprime Engage	Notification	Dr Beat Practice		Dr Best Practice	HealthLink Townsville	Yes	NSW Heath
08/08/2023 Ma	rie Figueroa	Notification	Best Practice	Marie Figueroa	Dr Best Practice	HeathLink Townsville	Yes	SA Health
08/08/2023 Ma	arie Figueroa	Notification	Best Practice	Marie Roueroa	Dr Best Practice	HealthLink Townsville	Yes	SA Health
08/08/2023 Ma	rie Figueroa	Notification	Best Practice	Marie Figueroa	Dr Best Practice	HeathLink Townsville	Yes	SA Health
0R/0R/2023 Ma	irie Figueroa	Notification	Rest Practice	Marie Emueroa	Dr Rest Practice	HealthLink Townsville	Yee	SA Health
13/08/2023 Ma	arie Figueroa	Notification	Best Practice	Marie Figueroa	Dr Best Practice	HeathLink Townsville	Yes	SA Health
13/08/2023 Ma	erie Finuerna	Notification	Best Practice	Marie Boueroa	Dr. Best Practice	HealthLink Townsville	Yes	SA Health
10/08/2023 Lev	e Gina	LETTER - eRef update: Unspecified, CO	VID. Ready fort Best Practice	Lee Giria	Dr Rest Practice	HeathLink Townsville	Yes	Lachian Rumer
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< 88								
Allocated to user:	Dr Best Practice	Allocate to User	Auto-allocate					
Patient details:	Keerthi Engage Date of bith: 14/12/1982 10 Outback Court, Walkley H 5098	Allocate to Patient Heights.						

## Step 8: What if the LHD wants additional information?

If you receive a correspondence from the LHD to send additional information, please send a new referral through with the additional information:



Launch a **new HealthLink form** from the patient's file.



In the new form, for **Referral type**\*, Select **'Updated'** 

Then complete the form with the additional information that was requested by the LHD.

ke a reforral Update a referral	
earch a Private Specialist or Allie	d Health Provider to Refer Patient
Type individual / practice name, or specially then enter	Search Help Clear State Teamania
eferred Services	
Aged Care Referral	Medical Certificate for Insurance Claim
Aged Care Referral Cardiometabolic Health in Psychosis	Medical Certificate for Insurance Claim NSW Health Outpatient Referrals – [LHD Name
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Aged Care Referral Cardiometabolic Health in Psychosis Certificate of Capacity Community Health Fitness to Drive Assessment	Medical Certificate for Insurance Claim NSW Health Outpatient Referrals – [LHD Name Online Medical Certificate Outpatient and Community Referral Form Radiology Referrals

Health Specialist Consulting Clinics

INDIA	Gastroenterology & Liver Clinics		Submit	Preview	Park
Requested Information 🔺	Referred To*	Please Select	*		
Gastroenterology & Liver Clinics	Patients presenting at NSW public hospitals can choose to be treated as a public (hospital funded) or private (Medicare bulk-billed) patient. Public hospitals do not control referral pathways to deny access to free public hospital services. Patients will be provided with further information and will be asked to make an election when they present to the outpatient clinic for their appointment. Patients will				
Attachments / <u>R</u> eports	require a named referral to a medical specialist if they choose to be a private patient				
No reports selected No files attached	Referral date*	17/10/2023			
	Referral type*	O New			
Medications, Allergies, Alerts		Updated     B			
No long term medications specified		<ul> <li>Continuation</li> </ul>			
2 medical warnings specified	Referral period*	12 months 🗸			
Medical Coolel and Family	Referral priority	rral priority Non-urgent (365 days) 🗸			
History	Patient available for appointment at short notice?	O Yes 🔘 No			
No medical history specified	Is patient suitable for virtual care?	O Yes O No O Unsure			
	Third party compensable?	🔿 Yes 💿 No			
Patient Information A Test ERMS 6950539691 1	HealthPathways	. She a small of a state of small			
01/02/1962					
Pafarrar Information	Keason for referral	Fledse select			w.





# **GP NOTIFICATIONS**



## **Referral Notifications**

\* The eRMS will send notifications to the patient for <u>all referral types</u> (eReferrals, faxed, and manually entered "paper" referrals) if their communication preference is "SMS", "Email" or "SMS and Email".

Notification Type	Referrer (e-Referrals)	Referrer (Non-eReferrals fax, paper <u>etc</u> )	Patient*
On Receipt	0	8	8
On Hold (Request for additional information)	0	8	8
Message to Referrer (Adhoc communication)	0	8	8
Screening Outcome – Not Accepted	<b>Ø</b>	8	0
Screening Outcome – Accepted	8	8	8
Redirected Referral	0	8	Ø
Reassigned Referral	8	8	8
Triage Outcome – Accepted & Not Accepted	0	8	0
Cancelled Outcome <ul> <li>Withdrawn by patient</li> <li>Withdrawn by referrer</li> <li>Unable to contact patient</li> <li>Referrer did not respond</li> </ul>	0	⊗	0

## **GP** Notifications



Work notes • 07-02-2024 09:25:12 just now

# Referral received

Referral placed on hold System

Communications sent to referring system: From: Central Coast Local Health District - Gynaecology Intake Referral Service Subject: Referral receipt NSW Health Referral ID: REF00008743 Patient: CCLHDUAT19 EOTEST (14-05-1965) Dear Best Practice Message from NSW Health regarding CCLHDUAT19 EOTEST 14-05-1965. Your referral has been received, we will notify you when the triage outcome is known. For urgent matters, please call us on the number below. Regards Central Coast Local Health District - Gynaecology Intake Referral Service

ME Madhusree Eedara

Communications sent to referring system:

From: Central Coast Local Health District - Gynaecology Intake Referral Service Subject: Referral on-hold NSW Health Referral ID: REF00007901 Patient: Forty CCLHD (01-02-1995) Dear Hamida Abdel-Mageed Message from NSW Health regarding Forty CCLHD 01-02-1995. We have attempted to contact the patient/carer to offer them an appointment but we were unsuccessful. We will try again shortly, if we are unsuccessful again we may cancel the referral. You will be notified if the referral is cancelled. Comments: 1st attempt failed

Regards Central Coast Local Health District - Gynaecology Intake Referral Service

# **GP** Notifications







ME Madhusree Eedara

Communications sent to referring system:

From: Central Coast Local Health District - Paediatric Intake Referral Service Subject: Referral not accepted NSW Health Referral ID: REF00007891 Patient: Thirty CCLHD (01-02-2010) Dear Hamida Abdel-Mageed Message from NSW Health regarding Thirty CCLHD 01-02-2010. We are unable to accept your referral because: Criteria not met. For urgent matters, please call us on the number below.

Regards Central Coast Local Health District - Paediatric Intake Referral Service

# **GP** Notifications



## **Referral Cancelled**

Communications sent to referring system:

From: Prince of Wales Hospital - Infectious Disease Clinic Dickinson 4 Clinic Subject: Referral cancelled NSW Health Referral ID: REF00006776 Patient: One Engage (01-02-1982) Dear Hamida Abdel-Mageed Message from NSW Health regarding One Engage 01-02-1982. Your referral has been cancelled because: Withdrawn by patient. For urgent matters, please call us on the number below. Regards Prince of Wales Hospital - Infectious Disease Clinic Dickinson 4 Clinic

# **GP** Notification





An Australian Government Initiative

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More information & Resources



Healthlink (SmartForms) support 1800 125 036 or <u>helpdesk@healthlink.net</u> <u>HealthLink SmartForms</u>

## **COORDINARE** Digital Health Team

1300 369 002 or <u>digitalhealth@coordinare.org.au</u>

Electronic Referrals | COORDINARE - South Eastern NSW PHN