Justice Health and
Forensic Mental Health Network

Justice Health NSW Policy

Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations

Issue Date: 22 November 2021

Together for
Healthier Tomorrows

Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations

Policy Number 1.264

Policy Function Continuum of Care

Issue Date 22 November 2021

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Risk Rating High

Summary This policy provides guidance to Justice Health and Forensic Mental Health Network staff with regards to referrals, bookings and cancellations for all internal and external appointments booked via the Medical Appointments Unit and Adolescent Health.

Responsible Officer General Manager, Primary Care

Applies to

☐ Administration Centres
☐ Community Sites and programs
☒ Health Centres - Adult Correctional Centres or Police Cells
☒ Health Centres - Youth Justice Centres
☐ Long Bay Hospital
☐ Forensic Hospital

CM Reference POLJH/1264

Change summary

- Definition of Medication Chart added
- Addition of: If the patient has an electronic Medication Chart, the Clinical Transfer to External Hospital eform within JHeHS will contain the patient's medications and must be completed.
- Definition of Patient Health Record added.
- Abbreviations updated.

Authorised by Chair, Policy Steering Committee

Revision History

#	Issue Date	Number and Name	Change Summary
5	November 2021	1.264 Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations	• Definition of Medication Chart added • Addition of: If the patient has an electronic Medication Chart, the Clinical Transfer to External Hospital eform within JHeHS will contain the patient's medications and must be completed. • Definition of Patient Health Record added. • Abbreviations updated.
4	September 2017	1.264 Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations	• Minor grammatical changes and changes to position titles.
3	July 2014	1.264 Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations	• Minor review
2	October 2012	1.264 Medical Appointments (External and Internal) – Referrals, Bookings and Cancellations	• Inclusion of the Forensic Hospital and Juvenile Justice • Incorporation of Policy 1.060 – Cancellation of Medical Appointments
1	May 2011	1.264 Medical Appointments – Referrals and Bookings	• New policy

PRINT WARNING

Printed copies of this document, or parts thereof, must not be relied on as a current reference document.

Always refer to the electronic copy for the latest version.

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Table of Contents

1. Preface 5
2. Policy Content 5
2.1 Mandatory Requirements 5
2.2 Implementation – Roles & Responsibilities 6
3. Procedure Content 8
3.1 Adult Medical Appointments via the MAU 8
3.1.1 Referrals 8
3.1.2 Bookings 9
3.1.3 Referring and Triaging of Patient Referrals 10
3.1.4 Triaging of MAU Day Clinical appointments 10
3.1.5 Appointment Cancellations 10
3.1.6 Pre Appointment Checklist 12
3.1.7 Prince of Wales Hospital (POWH) Secure Unit (Parkes 9 East) 12
3.1.8 Clinical Review 12
3.2 Adolescent Health (AH) Medical Appointments 12
3.2.1 External Medical Appointments 12
3.2.2 Adolescent Health Appointment Cancellations 13
3.3 Dental Appointments for Patients Residing in Centres without Dental Services 13
3.3.1 Adult Patients 13
3.3.2 Adolescent Patients 13
4. Terms, Abbreviations & Acronyms 14
5. Definitions 15
6. Related Documents 15
Appendix 1 – Preparation for Patient Prior to Attending an Outpatient Appointment by Specialty/Clinical Department 16
Appendix 2 – Information for Outpatient Staff: Healthcare for Patients in Custody 18

1. Preface

This policy provides guidance to Justice Health and Forensic Mental Health Network (the Network) staff with regards to referrals, bookings and cancellations for all internal and external appointments booked via the Medical Appointments Unit (MAU) for Adult patients and Adolescent Health (AH) in custody and juvenile detention.

It is essential that clinical staff working within the Network are able to track the status of referrals, appointments and cancellations for patients booked via the MAU and AH. The responsibilities of Health Centres are also outlined in this policy.

All adult and adolescent patients are entitled to health care at no cost to themselves in all NSW public hospitals as per NSW Ministry of Health policy directive PD2022_024 *Charging Arrangements for Hospitals and Other Health Services*.

The MAU forms part of the Network Integrated Care Service (ICS), which includes chronic/complex Care Coordinators and the Cancer Care Nurse Coordinator, who monitor eligible patients from entry at reception through custody and post release unto the community. Patients undergo a risk assessment by the Care Coordinators to determine which chronic/complex patients are eligible for the service. Active cancer patients are automatically accepted on the ICS.

The MAU is responsible for coordinating with internal and external healthcare providers to schedule and coordinate specialist appointments. The MAU work closely with Corrective Services NSW (CSNSW) Medical Escort Unit (MEU) based in Long Bay Hospital to co-ordinate the timely transfer of patients from the Long Bay Complex to external special appointments, predominantly at Prince of Wales Hospital (POWH) for males and Westmead Hospital for female patients.

The MAU clerks liaise with the Health Centre staff, Medical Officers (M.O.), external providers and the MEU to schedule appointments and manage waiting lists.

2. Policy Content

2.1 Mandatory Requirements

Adult Patients Health Centre staff must:

- Bullet point. Ensure that Medical Officers and Specialist Medical Officers enter all patient medical appointment referrals in the Patient Administration System (PAS). It is recommended that a corresponding entry is made on JHeHS progress notes regarding referral.
- For patients from Health Centres accessing appointments via the MAU ensure that a signed copy of the referral is scanned or faxed to the MAU via [redacted] or emailed to [redacted]
- For Health Centres accessing appointments via the Silverwater Medical Escort Unit (MEU), ensure the MAU Business Process is to be followed and the Health Centre escort lists are sent to the Silverwater MEU for action.
- Ensure patients who are required to access local health providers have their appointments managed locally by the responsible Health Centre Nursing Unit Manager (NUM) or Nurse in Charge (NIC).

- Ensure that emergency referrals are referred to local external health providers from the local Health Centre/inpatient facilities and not coordinated through the MAU.
- Inform the MAU or relevant department i.e. Physiotherapy or Radiology of patient cancellations immediately upon notification to Health Centre staff. The MAU must inform the Health Provider of cancelled appointments.
- In addition to the above, all non-Long Bay Correctional Complex (LBCC) adult male Health Centre NUMs must ensure that a local system is in place with their Corrective Services NSW (CSNSW) counterparts to permit the timely transfer of patients to the LBCC for appointments scheduled by the MAU.
- Health Centre staff are also responsible for providing essential clinical/diagnostic information and results to the MAU prior to patient transfer to the LBCC for medical appointments.

Medical Appointments Unit staff must:

- Liaise with internal and external providers to schedule and coordinate specialist appointments.
- Ensure all clinical documentation is electronically received from the Health Centres prior to appointment and provided to the CSNSW MEU the day prior to the appointment.
- Ensure that the CSNSW MEU staff are provided with a daily Medical Escort list for external appointments from LBCC and Metropolitan female centre/s.
- Ensure that all CSNSW centres on the LBC receive exigency paperwork for patient the morning prior to their appointment date.

Adolescent Patient Health Centre staff must:

- The Health Centre NUM must manage referrals, bookings and cancellations for internal and external appointments within the Health Centre and document in PAS.
- Medical Officers, Specialist Medical Officers and other staff must enter all patient medical appointment referrals in PAS.

2.2 Implementation – Roles & Responsibilities

Adult Patients

Health Centre Staff and the NUM are responsible for:

- Ensuring all referrals to MAU have a corresponding PAS entry and are scanned into JHeHS under Document Category: 3.0 Clinical Administrative Correspondence.
- Ensuring the MAU receive signed referrals only.
- Liaising directly with the MAU for referrals requiring urgent attention.
- Ensuring systems are in place with local CSNSW staff to facilitate transfers to the LBCC.
- Facilitating pre appointment appointments or clinical review. All pre appointments need to be completed prior to patients leaving their centre to attend LBH and progress notes entered on JHeHS.

- Ensuring documents/results for male patients attending external appointments are sent to the MAU prior to patient's external appointment via [redacted] or email to [redacted]
- Advising patient of the risks associated with cancelling appointment when relevant. A nurse must sign/witness the cancellation form and document in the patient's Health Record along with any follow-up action.
- The Network form JUS020.045 *Appointment Cancellation by Patient* form must be scanned by the Health Centre Clerk into JHeHS under Document Category: *3.0 Clinical Administrative Correspondence* with Document Title: *3.0 Appointment Cancellation by Patient.*
- A copy of the Network form JUS020.045 *Appointment Cancellation by Patient* form must be emailed to the relevant departments:
  - [redacted]
  - [redacted]
  - [redacted]
- Refer to 3.1.4 for further information regarding cancellation process.
- Ensure that correspondence from external providers received by the MAU and scanned into JHeHS is viewed by a clinician and signed off.

The MAU is responsible for:

- Authorising all signed referrals received from Health Centres and immediately opening a waitlist entry for the patient and attaching the referral to the waitlist entry on PAS.
- Liaising with internal and external providers to schedule appointments.
- Scheduling transfer requests on the Offender Information Management System (OIMS) to enable transfer to the LBCC to occur.
- Coordinating clinics scheduled at the Long Bay Hospital Area 2 Outpatients Department (LBH2 OPD), including notifying CSNSW centres on the LBCC of patients requiring transfer to the LBH2 OPD and liaising with external specialist regarding scheduling dates for clinics at the LBH2 OPD.
- Liaising with CSNSW High Risk Management Correctional Centre (HRMCC) at Goulburn Extreme High Security Unit (EHS) and the Special Purpose Centre (SPC) staff where appropriate.
- Liaising with the POWH to de-identify EHS patients who are attending appointments at the POWH.
- Informing Health Centres via PAS, email and Fax of any preparation required by a patient prior to a procedure or surgery.
- Ensuring an outcome (e.g. did not attend (DNA) is selected in PAS to indicate whether the patient has attended the appointment, for all male and female external appointments as soon as possible.
- Ensuring CSNSW receive exigency requests for patients at the LBC the morning prior to their booked external appointments.

- Conduct regular audits on wait lists to remove released patients and inform providers of the same.
- Cancelling appointments booked via the MAU with external providers and CSNSW and recording reason on PAS. Rebooking a new appointment as indicated by clinical staff.
- Scan into JHeHS all correspondence received by the MAU from external providers. It is the Health Centres responsibility to ensure that the correspondence is checked by a MO/Nurse Practitioner to ensure that referrals for follow up are completed and sent to the MAU [redacted] or emailed to [redacted] if required.
- Ensuring that the Information for Outpatients Staff: Healthcare for Patients in Custody letter is sent with every external appointment booked by the MAU Appendix 2; and

CSNSW Partnership:

- CSNSW provide the transport to and from external medical appointments.
- MAU provide clinical correspondence to CSNSW to directly hand to the external service provider.
- CSNSW provide security services at all times at medical appointments.
- CSNSW Officers are not responsible for management of the patient's healthcare needs.
- The CSNSW Officers are not responsible for clinical handover of the patient's health issues or information about the services provided at the Network.

3. Procedure Content

3.1 Adult Medical Appointments via the MAU

Text:

- Bullet point.

3.1.1 Referrals

1. All referrals to the MAU from Health Centres must be entered on PAS by the referring clinician (or delegate). A signed copy of the referral must then be sent to the MAU Fax [redacted] or emailed to [redacted] The MAU cannot action unsigned referrals as external health providers will not accept these. Health Centre staff must liaise directly with the MAU for referrals requiring urgent attention.
2. All referrals must include relevant test results and provide sufficient clinical information for POWH to allocate an accurate triage category.
3. Once the MAU receives a signed referral, the referral in PAS is authorised and placed on a PAS waiting list. Health Centre staff are able to view waiting lists for individual patients or via specialities on PAS/JHeHS. If a patient does not have a waiting list entry, it is likely that the MAU has not received a signed referral.
4. Health Centres must ensure that clinical documentation including a copy of the current medication chart, pathology, medical imaging, ECGs and other test results relevant to

the patient's appointment are made available to the MAU prior to the patient's appointment date (e.g. CT scan for plastics appointment, ECG and medication chart for cardiology).If the patient has an electronic Medication Chart, the Clinical Transfer to External Hospital eform within JHeHS will contain the patient's medications and must be completed. Refer to Appendix 1 for specific examples. For all Oral Health referrals and appointments please refer to the Network policy 1.130 *Oral Health Services*.

5. The MAU staff via the ICS Data Manager must run monthly reports for unauthorised (unsigned) PAS referrals and provide these to the relevant Nurse Manager for review and follow up.

3.1.2 Bookings

1. All signed referrals received by the MAU are placed on a PAS waiting list. The MAU books all appointments via PAS from the patient waiting list entry.
2. Internal outpatient medical appointments for clinics at LBH2 OPD are booked via the MAU. The MAU liaises with providers for clinic dates and schedules appointments accordingly. The provider informs the MAU of the number of consultations (new patients) and reviews (follow ups) per clinic session. The MAU books urgent patients first, as indicated by clinical priority on referral. Specialist conducting clinics at the LBH2 OPD may refer patients to external providers.
3. All specialist appointments and diagnostic tests that are not available via the LBH2 OPD are referred to external providers. The MAU liaises with providers for appointment dates and these are scheduled subject to CSNSW escort availability and urgency as determined by health providers triage protocols. The Network referrals to external OPD clinics are triaged at the public hospitals by the relevant specialists/registrars (or delegate). The MAU liaises directly with most non OPD departments to book appointments. This could include telehealth appointments as determined by JHFMHN staff or health provider.
4. The MAU schedules transfer requests in the Offender Integrated Management System (OIMS) to ensure a transfer request is initiated for patients requiring transfer to the LBCC for their appointments. Transfer requests are generated by local CSNSW staff with CSNSW Inmate Transfers. Health Centre staff must ensure that local processes are in place to ensure that their local CSNSW staff raise transfer requests with Inmate Transfers. Failure to do this will result in the patient not being transferred for their medical appointment.
5. The MAU must liaise directly with the High Risk Management Unit (HRMU) for all HRMU patients requiring transfers to appointments booked via the MAU. The MAU must also liaise directly with the Special Purpose Centre (SPC) for all appointments booked via the MAU for SPC patients. Extreme High Risk Management Unit (EHSRMU) and patients from female centres accessing services provided at the LBH2 OPD will be transferred on the day of their appointment.
6. Patients requiring special transport for their appointments must have a the Network JUS200.035 *Medical Certificate Consideration for Special Transport* form completed by Health Centre staff as per the Network policy 1.395 *Transfer and Transport of Patients*.

3.1.3 Referring and Triaging of Patient Referrals

As per the Network Policy 1.252 *Access to Local Public Hospitals*; clinical priority category must be determined by the referring MO which will then be triaged by the specialist team in POWH.

If the referring MO has clinical concerns about an appointment date that has been provided by POWH they should contact the specialist team at POWH directly.

MAU is not responsible for negotiating with a specialist team to change appointment dates due to clinical urgency. The MO making the referral to a specialist must:

- Decide the urgency of the referral
- Ascertain the expected waiting time for the appointment type that is required. Expected waiting times are available by contacting the MAU; and
- Consider the patient's earliest possible release date as this may be a factor in determining whether the patient may be released before the appointment could be attended.
- POWH to inform MAU of any tests requested at the time of triage. MAU to inform health centre to arrange and, communicate and send results to POWH once completed for further clinical review or appointment booking

3.1.4 Triaging of MAU Day Clinical appointments

- MAU will send the Remote Offsite After Hours Medical Service (ROAMS) GP the Day Clinic Report for external appointment list on the day prior to the appointment date
- The ROAMS GPs will triage patients according to the patient's diagnosis, their referral, as well as noting what has been documented in the comments section (right side of the list).
- ROAMS GPs are to triage patients numerically with 1 Urgent, 2 Semi Urgent and 3 Non Urgent
- Once this list is completed it is to be emailed to [redacted] The MAU will email this list to CSNSW Medical Escort Unit (MEU).

3.1.5 Appointment Cancellations

1. Patients have the right to cancel appointments. However, all cancellations and refusals by patients to attend arranged medical appointments must be documented in the patient's Health Record and on PAS. Clinicians must advise the patient of the risks to his/ her health by cancelling the appointment.
2. The MAU must be advised of appointment cancellations as soon as possible so that the health provider can be notified and the appointment can be allocated to another patient.
3. The cancellation and reason must be recorded on PAS by MAU staff or the relevant department i.e. Physiotherapy and Radiology. The MAU must inform CSNSW staff of cancellations so transfers for appointments may be cancelled.
4. If a patient cancels two booked outpatient appointments for the same outpatient service, the patient may be removed from the appointment list. Before removing the

patient from the list, the NUM must speak to the patient about the potential health risks associated with cancelling the appointments. If the patient wishes to remain on the waitlist they should be reinstated without penalty. If the patient still wishes to cancel the appointment the Health Centre Clerk must scan the JUS020.045 *Appointment Cancellation by Patient* form into JHeHS and advise the relevant department MAU/Physiotherapy/Radiology via email

[redacted]

5. If a patient fails to attend the re-booked outpatient appointment, the NUM must consult the referring health practitioner to determine if the patient is to be removed from the appointment list or invited to rebook the appointment again. If the patient is to be removed from the list, the NUM must inform the relevant department MAU/Physiotherapy/Radiology via email. MAU/Physiotherapy/Radiology must notify the patient in writing that they have been removed from the waiting list see Appendix 3.
6. If the patient is to be offered a rebooking for a missed appointment, the NUM must advise the patient. If the patient accepts the rebooking, the NUM must inform MAU using the Network form JUS020.045 *Appointment Cancellation by Patient* form to advise the relevant department MAU/Physiotherapy/Radiology to rebook the appointment. When a patient fails to attend a rebooked appointment, the patient should be removed from the waiting list.
7. As with the removal of patients from waiting lists, the needs of 'at risk' populations should be taken into account and careful consideration given to individual circumstances to avoid disadvantaging patients in the case of genuine hardship, misunderstanding or other unavoidable circumstances.
8. The reason for removal should be recorded on PAS, the patient's Health Record and e-progress notes and the GP/referrer and patient must be notified (GL2023_014 *Management of Outpatient (Non-Admitted) Services*).
9. If an appointment is cancelled by CSNSW, the Health Centre staff must communicate the risks to CSNSW via the *Network Health Problem Notification and Escort Form* (Adolescent) on PAS and follow the Network policy 1.231 *Health Problem Notification Form (Adults)* to escalate to the NUM as required. This interaction must be documented in the patient's eProgress notes and logged on the Incident Management System (IMS+).
10. If a patient has been released from custody, Health Centre staff must inform the MAU. All cancellations are monitored and recorded on the Patient Administration System (PAS) by the relevant departments MAU/Physiotherapy/Radiology, including reason for cancellation and rebooking of an appointment, if requested by patient. Cancellations made by CSNSW or other service providers are rescheduled by MAU without patient request.

3.1.6 Pre Appointment Checklist

All patients attending specialist appointments booked by the MAU must be reviewed by the Health Centre prior to the appointment. The MAU will provide the following week's appointment list the week prior. The Health Centre must provide MAU with the relevant information required regarding the appointments (refer to Appendix 1 for specific examples).

Pre Appointment Review

The Primary Health Nurse must:

a. Interview the patient and inform MAU if an interpreter is required

b. Confirm patients willingness to travel for the appointment; and

c. Ensure relevant information i.e. test results, ECGs etc. as per the checklist provided by the MAU is sent to the MAU at least one week prior to the appointment date.

3.1.7 Prince of Wales Hospital (POWH) Secure Unit (Parkes 9 East)

Appointments and treatments for inpatients at Parkes 9 East are coordinated by Parkes 9 East nursing staff and the MAU.

1. The MAU informs the CSNSW Medical Escort Senior Officer of any additions to the daily appointment list. Depending on the work load and schedule for the day, other appointments are cancelled or rescheduled to accommodate POWH Secure Unit patients.

2. Where POWH Secure Unit appointments result in booked MAU appointments being affected, the Manager Integrated Care Service (ICS) must discuss this with the MO, ROAMS who will triage the MAU daily list.

3.1.8 Clinical Review

Service Provider specialist appointment wait times and cancellations of patient appointments must be tabled at the Integrated Care Service (ICS) Clinical Review Committee for monitoring, review and escalation as required.

3.2 Adolescent Health (AH) Medical Appointments

3.2.1 External Medical Appointments

External medical appointments at AH sites are arranged by the Health Centre. AH staff have the following responsibilities when arranging an external medical appointment:

1. External appointments should be booked at a local hospital where possible, and should be booked during school hours due to the availability of Youth Justice NSW (YJNSW) staff during this period. If this is not possible, the YJNSW Centre Manager or YJNSW Assistant Manager should be consulted.

2. The appointment must be recorded in PAS using "Dr Outsourced Clinician" and the local Health Centre clinic (e.g. Acmena External Appointments Health Centre).

3. The referral must be printed in duplicate and signed by the referring clinician. A copy is sent with the adolescent patient to the appointment (along with any other documentation relevant to the referral) and another copy is filed in the patient's Health Record.

4. The YJNSW Centre Manager or the YJNSW Assistant Manager must be advised of transport requirements (e.g. time, date, location, special vehicle needs).
5. All young people who have an identified health issue that requires the attention of JJNSW staff must have a current the Network *Health Problem Notification & Escort (Adolescent) Form* completed. Relevant signs or symptoms must be written in lay terms. Refer to the Network policy 1.235 *Health Problem Notification and Escort Form (Adolescents)* for further information.

When the external appointment has been made, the Clinic Support Officer (CSO) must prepare a JUS200.060 *Adolescent Health Attendance at External Appointments* form that is located at the front of the patient's Health Record and is later filed in the Clinical Correspondence section when the appointment has been attended. A copy of this cover sheet should be given to JJNSW staff for their information and transport arrangements.

YJNSW staff are responsible for escorting the young person to his/ her external medical appointment. AH staff must not escort a young person unless approved by the Network Director of Nursing and Midwifery Services (NDONMS).

If the young person requires medication, it must be administered by a registered nurse (RN)/enrolled nurse (EN) within the Medication Chart prior to escort to the external medical appointment. If an RN/EN is not available, the following must occur:

- When the RN is preparing the documentation for the external medical appointment, the AH After Hours Medication form must be completed; and
- The medication must be prepared with clear instructions included. Wherever possible, speak to the transporting staff and instruct them about the correct procedures for medication administration.
- For security reasons, the young person must not be informed of the date of the appointment.

3.2.2 Adolescent Health Appointment Cancellations

See 3.1.5

YJNSW and the external health care provider must be notified of the appointment cancellation as soon as possible.

3.3 Dental Appointments for Patients Residing in Centres without Dental Services

3.3.1 Adult Patients

For patients requiring urgent dental care, the NUM must contact Oral Health Administration (OHA) to schedule an appointment at the LBCC. Health centre staff must ensure that local processes are in place to ensure that their local CSNSW staff are aware of the transfer request. Failure to do this will result in the patient not being transferred for their dental appointment. OHA can also assist with the transfer of patients and can be contacted on [redacted]

3.3.2 Adolescent Patients

Where there is no dental service available in a Youth Justice Centre and where an adolescent patient requires urgent dental care, the NUM or delegate will contact the public dental service to request an appointment. Where this is not available, private dental services can be arranged.

Approval to engage with the private community service must be obtained on the Network form *Local Private Provision of Health Services Request* (JUS200.040) from the relevant Executive Director. Local processes must by adhered to when arranging transport with YJNSW.

4. Terms, Abbreviations & Acronyms

Terms, Abbreviations & Acronyms	Meaning
AH	Adolescent Health
CSNSW	Corrective Services NSW
CSO	Clinical Support Officer
EHS	Extreme High Security Unit
EN	Enrolled Nurse
HRMCC	High Risk Management Correctional Centre
HRMU	High Risk Management Unit
Patient Health Record	Paper-based and electronic Health Record combined
ICS	Integrated Care Service
IIMS	Incident Information Management System
the Network	Justice Health & Forensic Mental Health Network
JHeHS	Justice Health electronic Health System
LBCC	Long Bay Correctional Complex
LBH	Long Bay Hospital
LHD	Local Health District
MAU	Medical Appointments Unit
MEU	Medical Escort Unit
Ministry	NSW Ministry of Health
NDONMS	Network Director of Nursing and Midwifery Services
NIC	Nurse in charge
NUM	Nursing unit manager
OIMS	Offender Information Management System
OPD	Outpatients Department
PAA	Pre appointment-appointment
PAS	Patient Administration System
POWH	Prince of Wales Hospital
RN	Registered Nurse
SPC	Special Purpose Centre
YJNSW	Youth Justice NSW

5. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

Medication Chart

Refers to a paper-based (Long Stay Medication Chart, National Inpatient Medication Chart) or electronic medication order

Patient Health Record

A hybrid record of paper-based and electronic information pertaining to the health of the patient.

6. Related Documents

Legislations	*Nil.*
Justice Health NSW Policies, Guidelines and Procedures	1.130 *Oral Health Services* 1.231 *Health Problem Notification Form (Adults)* 1.235 *Health Problem Notification and Escort Form (Adolescents)* 1.252 *Access to Local Public Hospitals* 1.263 *Medical Holds* 1.395 *Transfer and Transport of Patients*.
Justice Health NSW Forms	JUS020.045 *Appointment Cancellation by Patient* JUS200.035 *Medical Certificate Consideration for Special Transport* JUS200.040 *Local Private Provision of Health Services Request* JUS200.091 *Notification of Patient Requiring Preparation Prior to Procedure/Surgery*
NSW Health Policy Directives and Guidelines	PD2022_024 *Charging Arrangements for Hospitals and Other Health Services* GL2023_014 *Management of Outpatient (Non-Admitted) Services*
Other documents and resources	*Nil.*

Appendix 1 – Preparation for Patient Prior to Attending an Outpatient Appointment by Specialty/Clinical Department

The table below shows a preparation list of required tests, investigations, reports for patients attending Outpatient Appointments in public health services.

Treatment Sheets/Medication Charts

The electronic Medication Chart should not be printed from JHeHS. The *Clinical Transfer to External Hospital* eform within JHeHS will contain the patient's medications and must be completed. This eform must be sent with the patient to every Appointment. For diabetics a copy of the BSL chart must also be sent.

Imaging Results

Where x-rays or ultrasound are conducted by the Network, MAU Officer will organise for copy of imaging to accompany the patient. If previous imaging at POWH e.g. CT/MRI, results will be on Patient's POWH Health Record, Imaging from another facility requires a copy of the imaging, as well as the report of the imaging.

Relevant Pathology

This includes: Recent blood tests as well as other investigations that are relevant to the consultation e.g. urine tests, wound swabs, biopsy.

Additional tests, investigations and/or information may be requested.

Specialty Clinical /Department	Required to be copied and sent to MAU prior to patients Appointment
Aged care	• Investigations • ECG • Reports from nursing and allied health about daily functioning • Relevant pathology
Cardiology	• Recent ECG and previous ECG, requested for comparison • Echo, if required, or results if completed • Relevant pathology
Colonoscopy	• 10 days prior to appointment – inform MSU, Manager of Domestic Services and the NUM of clinic where patient is, that the patient is to be moved to MSU to commence further prep for colonoscopy • 4 day Glycoprep • Fast from midnight prior to procedure • Relevant pathology
CT	• Patient must be able to identify area of body for CT
Colorectal	• As for Gastroenterology
Dermatology	• Relevant pathology
Diabetic Clinic	• Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound

Endocrinology	• Relevant pathology • Nuclear med studies • Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound
Endoscopy	• Fast from midnight
ENT	• Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology

Gastroenterology	• Results of any studies/ investigations e.g.
	  ○ Colonoscopy/ Endoscopy
	  ○ Biopsy
	• Imaging: X-ray, CT, MRI, Ultrasound
	• Relevant pathology

General surgery (Consultation for surgery)	• Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology
Haematology	• Specific bloods (Doctors request tests required on the referral form) • Relevant pathology
Infectious diseases	• Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound • Specific Bloods (Doctors request tests required on the referral form)
MRI	• Patient must be able to identify area of body for MRI
Neurology	• Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology • Report from Physiotherapist, if receiving treatment • If for Epilepsy include record of seizures and known history
Neurosurgery	• EEG • Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound
Oncology	• Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology
Orthopaedic	• Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology • Report form physiotherapy, if receiving treatment
Pain	• Relevant diagnostic tests • Reports form relevant specialists • Imaging: X-ray, CT, MRI, Ultrasound • Relevant pathology • Report from Physiotherapist, if receiving treatment
Plastics	• Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound • Report from Physiotherapist, if receiving treatment
Rheumatology	• Relevant pathology • Imaging: X-ray, CT, MRI, Ultrasound • Report from Physiotherapist, if receiving treatment
Surgery	• Relevant Pathology • Imaging: X-ray, CT, MRI, Ultrasound
Urology/ Renal	• Recent Renal Function Tests • Relevant pathology • MSU • Reports of Cystoscopy • Urodynamic studies • Imaging studies - Imaging: X-ray, CT, MRI, Ultrasound • NB Requires previous result for comparison

Appendix 2 – Information for Outpatient Staff: Healthcare for Patients in Custody

Dear Outpatient /Clinical Staff

Re: *Name*:

DOB:

MIN:

Correctional Centre:

Thank you for treating our patient. The following information may assist you when clinically managing and discharging an outpatient in your care.

Healthcare needs: A summary of the patient's presenting condition and relevant history is attached for your information. Should you require any further health information please do not hesitate to contact the Medical Appointments Unit (MAU) on [redacted]. Information regarding the patient's health should not be sought from the Corrective Services NSW / the private operators Officers accompanying the patient. To ensure continuity of care, please provide a consultation summary via fax to the MAU on [redacted]. This information must then be placed in a sealed envelope and marked Confidential for the attention of the Network staff at the referring Health Centre/ Inpatient facility.

Imaging/investigations: While we endeavour to have available all possible diagnostic/pathology results for the patient's appointments, there may be instances where more up to date results are required. If possible, we would appreciate any imaging/investigations etc. to be performed whilst our patient is at your facility, prior to discharge, as it can be difficult to arrange to transport a patient to hospital again the next day for imaging/investigations.

Prescription of Medications: Some medications that you may recommend for our patients, especially opioid derivatives, may be unsuitable to administer in a custodial environment due to a potential for the medication to be misused by other patients. Our medical staff would be pleased to advise further (the Network on call medical officer [redacted]).

Custodial Staff: The Corrective Services NSW Officers / the private operators Officers are present to ensure the security of the patient. The officers are required to remain with the patient at all times and to ensure that the LHD nursing, medical and allied health staff can provide treatment safely. Corrective Services NSW / the private operators Officers are not responsible for management of the patient's healthcare needs.

Use of Handcuffs/Restraints: Please ask the Corrective Services NSW / the private operators Officers accompanying the patient to temporarily remove the patient's physical restraints if they impede your ability to assess the patient, perform medical procedures and/or deliver health care.

Confidentiality: The Corrective Services NSW / the private operators Officers are not in a position to discuss the health issues of our patients and cannot provide accurate information about the services that the Network provides. This is because we are two separate services. Also, NSW Ministry of Health guidelines regarding privacy and consent apply, and patient confidentiality does not extend to Corrective Services NSW / the private operators Officer's. Health needs of patients and escort requirements are potentially conflicting issues that require sensitive management. Please contact the Network MAU on [redacted] if you have any questions.

Return back to the Network: Patients are usually transported to your facility in a Tarago HiAce van. Should you feel there are any situations where this mode of transport is inappropriate, please advise the officers so that alternative transfer arrangements can be made.

Follow-up appointments: If a patient has a follow up outpatient appointment, please **do not tell the patient the date of the appointment**, as this may pose a security risk and the appointment will need to be re-scheduled. Please document the next appointment time on the consultation summary that is faxed and returned to the MAU. If you are unable to contact staff on the above numbers and/or in the case of an emergency, please call the Network After Hours Nurse Manager on [redacted].

When mailing out a more detailed summary from your consultation with our patients **please do not address your correspondence to the patient or the referring clinician**. Please direct all correspondence to the address below:

The Medical Appointments Unit | Justice Health and Forensic Mental Health Network | PO Box 150 Matraville NSW 2036 | [redacted]