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CHAPTER 18 - OUTPATIENTS

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Last updated August 2023

MANAGEMENT OF OUTPATIENT (NON-ADMITTED) SERVICES
(GL2023_014)

GL2023_014 replaced GL2019_011

GUIDELINE SUMMARY

This Guideline sets out expectations for the management of outpatient services across NSW Health to ensure patients receive responsive and appropriate care that is patient-centred and focuses on outcomes that matter. It provides guidance for the planning, provision, and delivery of outpatient services. Adherence to this Guideline is intended to optimise outpatient care provided to the NSW population.

KEY PRINCIPLES

Local Health Districts and Specialty Health Networks are to use this Guideline to:

- understand the expectations of the NSW Ministry of Health regarding standards to be met for the planning, provision and delivery of NSW Health outpatient services,

- identify gaps or required improvements to meet these standards, and

- establish goals and timeframes to implement solutions and change processes.

Articulating principles, procedures and processes for the optimal provision of outpatient services aims to improve patient and clinician experiences, and support patients to receive care within clinically recommended timeframes.

NSW Health organisations are to plan, deliver and manage outpatient services in accordance with this Guideline.

While access to care in the outpatient setting is prioritised based on clinical need, the way in which the care itself is provided once this prioritisation has occurred is to be respectful of, and responsive to the needs, values and preferences of patients.

Processes are to be in place to facilitate safe, timely and effective referral management. This includes ensuring referral screening takes place efficiently upon receipt of a referral, and appropriate management occurs thereafter. NSW Health organisations are, at a minimum, required to communicate with patients and referrers regarding referral receipt and triage outcome.

Categorisation of clinical urgency is based on clinical need, regardless of financial classification status or expected wait times. Every effort is to be made to ensure patients are seen within clinically recommended timeframes.

Active management of outpatient waitlists is to be part of routine processes to ensure timely access to care. This includes confirming waitlists are accurate and complete, managing changes in clinical urgency categories, waitlist suspensions, waitlist removals and waitlist reinstatements. In addition, waitlists are to be regularly audited as a core component of evaluating access performance and identification of potential risks.

Appointment management is to be patient-focused and take place based on clinical urgency and the 'Treat in Turn' principle. Adequate information is to be provided to patients to support accessing their outpatient appointment. Regular communication with referrers and General Practitioners (GPs), if not the referrer, should is to occur throughout the episode of care to maintain collaborative management of the patient.

Discharge (or transfer of care) planning is to commence at the first appointment with the aim to ensure patients are transferred back to the care of the referrer in a timely manner. Transfer of care summaries provided to referrers and/or GPs are to include ongoing management plans. Clear escalation pathways to streamline re-entry into outpatient services and forego the need for a re-referral are to be considered and communicated to referrers, where clinically indicated.

Download the complete Management of Outpatient (Non-Admitted) Services guideline at:
https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=GL2023_014