



Team Name: Rehabilitation Services	Reference Number: CLI.6310.SG.007
Team Lead: Director - Rehabilitation	Program Area: Rehabilitation/Therapy Services
Approved by: Regional Lead – Community & Continuing Care	Policy Section: General
Issue Date: September 17, 2018 Review Date: Revision Date: June 13, 2022	Subject: Referral Prioritization for Community Based Rehabilitation Services and Outpatient Occupational Therapy Adult Service

Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted

STANDARD GUIDELINE SUBJECT:

Referral Prioritization for Community Based Rehabilitation (CBR) Services and Outpatient Occupational Therapy (OT)

PURPOSE:

All Referrals for CBR services and Outpatient OT services will be reviewed by a therapist to assess priority service needs of clients based upon referral information. Clients referred to CBR may be seen at home or as an outpatient as determined by therapist.

The therapist will review the CBR Referral Form (CLI.6310.SG.007.FORM.01) or Rehab Services Outpatient Referral Form (CLI.6310.SG.002.FORM.01), to determine referral priority status as per process below:

PROCEDURE:

1. The therapist will document assigned priority status, P1, P2, and P3 on the referral.
2. If information on referral form is insufficient to determine priority, the therapist will contact patient/referral source to gather more information.
3. The therapist will complete the CBR Referral Prioritization and Screening form and attach it to the CBR Referral form.
4. The therapist will return the referral to the designated support staff to complete the referral intake process.
5. P2 and P3 referrals will be informed of approximate wait time.

Priority

Priority 1 is the highest priority, most urgent, and Priority 3 is the lowest priority.

Based upon referral information, Priority 1 status will be assigned to referrals requiring more urgent assessment/intervention. Priority 1 referrals will be seen for initial appointment before Priority 2 and Priority 3 referrals.

Referral priority status is subject to change based on new information which impacts the urgency of assessment and intervention.

Occupational Therapy Referrals:

Priority 1 clients with the following needs, should be seen within two weeks from receipt of referral:

- Recent discharge from hospital upon recommendation by inpatient therapist (clerk to book in time frame indicated by therapist)
- High risk of pressure injuries or existing pressure injuries related to immobility and/or positioning
- Palliative clients

Priority 2 clients with the following needs, should be seen within four weeks from receipt of referral:

- High risk of falls as indicated by a recent Falls Risk Assessment Tool (FRAT)
- Mobility and/or environmental issues
- Client and/or caregiver at high risk of injury related to transfers, mobility and activities of daily living (ADL)
- Wheelchair assessment when there are no other means of mobility
- Acute, subacute or functional decline - neurological concerns

Priority 3 clients with the following needs, should be seen as appointment spaces become available:

- Wheelchair requests – manual and power when wheelchair is not primary means of mobility
- Client specific transfer instruction/demonstration
- Home management – ADL or safety concerns
- Home access issues
- Exercise program review and staff instruction
- Cognitive change affecting function

Physiotherapy Referrals:

Priority 1 clients with the following needs, should be seen within two weeks from receipt of referral:

- Recent discharge from hospital (clerk to book in time frame indicated by therapist)
- High risk of pressure injuries or existing pressure injuries related to immobility and/or positioning
- Palliative clients

Priority 2 clients with the following needs, should be seen within four weeks from receipt of referral:

- Acute condition impacting ability to remain at home or complete ADL's
- High risk of falls as indicated by a recent Falls Risk Assessment Tool (FRAT) (CLI.5413.PL.001.FOMR.01)
- Mobility and/or environmental issues
- Recent fracture or dislocation

Priority 3 clients with the following needs, should be seen as appointment spaces become available:

- Initiation or review of home exercise program
- Recent soft tissue injury
- Chronic conditions or pain

SUPPORTING DOCUMENTS:

[CLI.6310.SG.002.FORM.01](#) Rehab Services Outpatient Referral Form

[CLI.6310.SG.007.FORM.01](#) Community Based Rehabilitation Services Referral

REFERENCES:

CLI.5413.PL.001.FORM.01 Falls Risk Assessment Tool (FRAT)