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Document Type: Policy	Code: DHA/HRS/HPSD/HP-14	Version Number: 2.1
Document Title: Patient Referral and Inter-Facility Transfer	Issue Date: 23/12/2022	Effective Date: 23/02/2023
Ownership: Health Policies and Standards Department		
Applicability: All DHA Licensed Health Facilities in the Emirate of Dubai		

1. Purpose:

- 1.1. The Patient Referral and Inter-Facility Transfer aims to fulfil the following overarching Dubai Health Authority (DHA) Strategic Priorities (2022-2026):
- 1.1.1. Pioneering Human-centered health system to promote trust, safety, quality and care for patients and their families.
- 1.1.2. Make Dubai a lighthouse for healthcare governance, integration and regulation.
- 1.2. To ensure the highest standards of care for patient referral and inter-facility patient transfer.
- 1.3. To assure continuity of patient care and maximize patient outcomes.
- 1.4. To set out the minimum requirements for patient referral and inter-facility patient transfer.

2. Scope:

- 2.1. Patient referral between Health Facilities (HF) under DHA jurisdiction.
- 2.2. Inter-facility patient transfer between HF under DHA jurisdiction.

3. Definitions:

Diagnosis-related group (DRG) is a patient classification system that standardizes prospective payment to hospitals and encourages cost containment initiatives.

Emergency Medical Condition is a condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in:

- Placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, or
- Serious impairment to bodily functions, or
- Serious dysfunction of any bodily organ or part;

OR

- With respect to a pregnant woman who is having contractions:
 - That there is inadequate time to effect a safe transfer to another hospital before delivery, or
 - That transfer may pose a threat to the health or safety of the woman or the unborn child.

Health Facility Any facility, owned and managed by natural or corporate body, provides medical services for individuals, including preventive, therapeutic and convalescent care services.

Healthcare Professional DHA licensed healthcare personnel working in a DHA licensed health facilities as per the applicable laws in the United Arab Emirates.

Most Responsible Physician refers to the qualified physician who have primary responsibility for the care of patient in the health facility

Patient Referral is a process in which a healthcare professional at a one level of the health system, having insufficient resources (drugs, equipment, skills) to manage a clinical condition, seeks the assistance of a better or differently resourced professional at the same or higher level to assist in or take over the management of the patient. This includes elective referral and referral for second medical opinion.

Referring health facility is the facility that starts the referral process.

Receiving health facility is the facility that accepts the patient from the referring facility.

Stable With respect to an emergency medical condition, to provide such medical treatment of the condition as may be necessary to assure, within reasonable medical probability that no material deterioration of the condition or delivery of an unborn child/placenta is likely to result from or occur during the transfer of the individual from a facility.

Transfer is the movement (including the discharge) of an individual outside a hospital's facilities at the direction of any person employed by (or affiliated or associated, directly or indirectly, with) the hospital, but does not include such a movement of an individual who:

- Has been declared dead, or
- Leaves the facility without the permission of any such person

ACLS : Advanced Cardiovascular Life Support

BLS : Basic Life Support

DRG : Diagnosis Related Group

EMT : Emergency Medical Technician

HF : Health facility

MOU : Memorandum of Understanding

HRS : Health Regulation Sector

4. Policy Statement

4.1. All HF shall have in place a system for patient referral and inter-facility transfer as per the functional scope of the HF.

4.1.1. All DRG guidelines and rules are applicable.

4.2. The HF shall develop and implement written policies and procedures regarding the patient referral and inter-facility transfer process as per applicable UAE regulations and international best practices.

4.2.1. The policy should clarify the referral/inter-facility transfer criteria/process, responsible healthcare professional communications, minimum equipment required to refer the patient as per their acuity.

4.2.2. The process for referral/inter-facility transfer shall address the needs of the patient for ongoing care.

4.2.3. The HF shall educate and train their healthcare professionals on their referral/inter-facility transfer policy.

4.2.4. Healthcare providers must ensure adequate level of care is maintained during inter-facility patient transfer.

4.2.5. The Facility should document situations when transfer is not possible.

4.2.6. All HF must ensure they fulfill the licensing requirements for Basic Life Support (BLS), Advanced Cardiovascular Life Support (ACLS) and Pediatric Advanced Life Support

(PALS) and contact emergency services for patients care as needed.

4.3. All Hospitals and Day Surgical Centers are required to:

4.3.1. Ensure crash carts are available for use and checked on a regular basis.

4.3.2. Have in place a Memorandum of Understanding (MOU) for ambulance transportation if not available in-house.

4.3.3. Have in place an MOU with a higher level HF for inter-facility patient transfer (management of complex and/or emergency cases).

4.4. Patients must not be denied emergency care and management on the basis of their health insurance product; as this breaches UAE Federal Laws No. 11 Of 2013 Concerning Health Insurance In The Emirate Of Dubai.

4.4.1. Termination of the emergency case shall be considered as per the Administrative Resolution no. 78 of the year 2022 issuing the Executive Regulations of law no. 11 of the year 2013 concerning Health Insurance in Dubai.

4.5. Patient Referral:

4.5.1. All HF must fulfil the minimum requirements set out in (**Appendix 1**).

a. The HF shall ensure the Patient Referral Form is written in Arabic or English.

4.5.2. Written referral for the following setting shall be met:

a. Referral to secondary or tertiary care setting shall be done in less than (5) working days from patient consultation.

i. Certain cases shall be referred within a shorter timeframe in accordance to patient needs and best practice clinical guidelines.

4.6. Inter-Facility Transfer:

4.6.1. A formal written agreement (MOU) between the initiating HF and receiving HF shall be implemented to formalize the inter-facility transfer process and ensure the efficiency and effectiveness of an interfacility transfer system.

- a. Facilities are required to have in place the sufficient number of agreements to ensure there is no delay in patient transfer that may compromise the patient's health.

4.6.2. The inter-facility transfer process should be integrated with the HF quality improvement and patient safety program.

4.6.3. All transferring HF must ensure obtaining a written/verbal approval to accept the transferred case from the receiving HF prior to initiating the process of transfer.

4.6.4. All HF must fulfil the minimum requirements set out in **(Appendix 2)**.

4.6.5. Patient data may be used for analyses and improvement of patient inter-facility transfer.

4.6.6. The transferring HF is responsible to undertake the following prior to patient transfer:

- a. Perform the appropriate physical and medical patient assessment and stabilization prior to transfer.
- b. Identify the availability of health services required to meet the patients' needs for continuity of care.
- c. Documenting all procedures, services, reports, documents and approvals related to the patient's health status in his health records.
- d. Determine the bed capacity to transfer and receive the patient in the receiving HF

through formal and documented communication.

- i. Capacity may be determined through the assistance of the ambulance service.
- e. Informing the patient of all available treatment options and obtaining his consent in case his health condition permits this, or obtaining the consent of the patient's family in case he is incompetent, lacking or unable to obtain his consent due to his health condition on referral to the receiving HF.
- f. Provide and organize in-house or out-sourcing ambulance services for transfer.
 - i. Mode of transportation shall be determined based on patient acuity, the treating physician's decision, the acceptance of the receiving facility and transportation team e.g. Emergency Medical Technician (EMT), competent physician or trained nurse in emergency/critical care.
 - ii. The initiating HF must ensure infection control measures are implemented and the transportation has in place appropriate medical equipment, supplies, drugs, medications and staffing are available within the ambulance to meet the needs of the patient during transfer.
- g. For scheduled or planned inter-facility transfer, ensure the patient is hemodynamically stable at the time of acceptance and update the receiving facility/professional with any changes. Changes in patient condition during the transfer shall be communicated to the receiving HF as necessary.
- h. For emergency transfers, with consecration of terms and conditions of emergency condition mentioned under Article (8) of the Federal Law No. (4) of the year 2016

concerning Medical Liability, regarding emergency cases that require immediate and necessary surgical intervention to save patient's life or the fetus, or to avoid gross complications that may suffer. Hence facility should communicate clearly with the receiving physician about the hemodynamic state of the patient (stable or unstable) at the time of acceptance. Update the receiving facility with any changes in patient status.

- i. Coordination and the timely transfer of appropriate information to the receiving facility.
 - i. Submission of a full medical report (care information, diagnosis and current condition of the patient, recent/anticipated changes in condition or treatment, suggestions for monitoring and interval of care to the receiving HF).
 - ii. The treating physician must report patient vitals and status to the transportation team prior to departure.
 - iii. A qualified healthcare professional will escort and monitor the physiological status of the patient during the referral of the patient according to the most responsible physician decision.
 - iv. All monitored parameters during transferring the patient shall be documented in the patient health records.

4.6.7. The receiving HF physician shall be given the transfer case details and approval of transfer shall be documented in the patient records for both parties.

- a. The receiving facility is responsible to provide the referring facility the final outcome

of the patient transfer and discharge.

- i. An interim update may be requested by the transferring facility.
- b. Upon arrival to the receiving HF, the healthcare professionals escorting the patient shall handover the patient to the most responsible physician with all relevant documents
- c. All appropriate steps shall be taken to ensure patient stabilization is not compromised:
 - i. Appropriate staff, equipment and medication shall be mobilized to manage the patient's acuity.
 - ii. Communication with the patient's next of kin should be done in a timely manner to ensure clinical decision making is not compromised.

4.6.8. All HF shall maintain the documentation of the Inter-Facility Patient Transfer and Patient Referral Registries as set out in (**Appendicies 3, 4, 5 and 6**).

4.6.9. All healthcare professionals involved in the provision of care during inter-facility patient transfer must have transport knowledge and skills comprising of:

- a. Radio and communication technology
- b. Safety operations.
- c. Transport equipment.
- d. Documentation including patient care records (manual/electronic).
- e. Transport logistics.
- f. Facility transfer standard operating procedures/protocols.

- g. Physician verbal orders, patient positioning during transport for safety and accessibility.
- h. All healthcare professionals involved in the provision of patient transfer shall have the knowledge and skills and meet the minimum requirements including but not limited to:
- i. Intravenous insertion, monitoring and maintenance, all forms of medication administration, airway management, ECG monitoring, defibrillation, cardio-version, transcutaneous pacing and offer basic intervention as needed.

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6. Appendices:

Appendix 1: Minimum requirements for Patient Referral Form

- a. Initiating Health Facility Name.
- b. Referral Type: Emergency/Non- Emergency.
- c. Receiving Health Facility Name and Receiving Speciality Name.
- d. Patient full name as per the passport/ Emirates ID, age, gender and patient identification number.
- e. Patient Date of Birth.
- f. Patient Contact Number.
- g. Diagnosis (ICD code).
- h. Diagnostic and Therapeutic Procedures Performed/Current Procedure Terminology (CPT).
- i. Relevant Medical History, Allergies and Co-morbidity.
- j. Significant Medications Given and Discharge Medications.
- k. Reason for Referral.
- l. Significant Physical and Other Findings.
- m. Patient's Condition/Status with clear explanation.
- n. Patient's hemodynamic status (if applicable).
- o. Follow-up Instructions/Information.
- p. Statement that the Physician/Dentist has discussed with the patient in understandable method the reason of referral.
- q. Patient Insurance Information (if applicable).
- r. Referring Physician's/Dentist's Name and Signature.
- s. Date and Time of referral.

Appendix 2: Minimum requirements for patient collection, transfer and drop off.

- a. Referring Health Facility Name.
- b. Referral Type: Emergency/Non- Emergency.
- c. Mode of transfer: ambulance/air-ambulance
 - Ambulance transfer document
 - Ambulance arrival time /pick-up time
 - Ambulance drop off time
- d. Receiving Health Facility Name and Receiving Speciality Name.
- e. Patient full name as per the passport/Emirates ID, age, gender and patient identification number.
- f. Patient Date of Birth.
- g. Patient Contact Number.
- h. Patient Insurance Information (if applicable).
- i. Diagnosis (ICD code).
- j. Relevant Medical History, Allergies and Co-morbidity.
- k. Significant Medications Given and Discharge Medications.
- l. Reason for Referral.
- m. Transfer Instructions/Information.
- n. Significant Physical and Other Findings.
- o. Patient's Condition/Status.
- p. Patient's hemodynamic status throughout the transfer.
- q. Therapeutic Procedures done during the transfer.
- r. Medication given during the transfer.
- s. Referring Physician's/Dentist's Name and Signature.
- t. Receiving Physician's/Dentist Name and Signature.
- u. Date and Time of pick up from referring facility.
- v. Name and details of the transferring healthcare professionals.
- w. Date and time of arrival to receiving facility.
- x. Total transport time from referring to receiving facility.

Appendix 3: Inter-Facility patient Transfer Out Registry Template

This registry contains the information of all cases transferred out of the facility to other health facilities

Transferring Facility Information	
Facility Name	
Type	
DHA License no.	

Serial no.	Date of transfer (d/m/y)	1. Patient Information				2. Transfer Information										
		Patient Name	Emirates ID Number	Age (years)	Gender	Reason for Transfer	Type of Transfer	Transfer Diagnosis (ICD code)	Mode of Transfer	Receiving Facility Name	Receiving Facility Type	Receiving Specialty	Was patient admitted to receiving facility?	Was feedback obtained from the receiving facility?	Date of feedback (d/m/y)	

Appendix 4: Inter-Facility patient Transfer In Registry Template

This registry contains the information of all cases transferred received from other health facilities

Transferring Facility Information	
Facility Name	
Type	
DHA License no.	

Serial no.	1. Patient Information				2. Transfer Information											
	Patient Name	Emirates ID Number	Age (years)	Gender	Reason for Transfer	Type of Transfer	Transfer Diagnosis (ICD code)	Mode of Transfer	Transferring Facility Name	Transferring Facility Type	Was the transfer communicated well by the transfer facility?	Receiving Specialty	Was the patient admitted?	Was feedback communicated with transfer facility?	Date of feedback (d/m/y)	

