



Chief Psychiatrist's Standards for Clinical Care

As required under Section 547 of the Mental Health Act 2014

Standard: Transfer of Care

The Mental Health Act 2014 requires the Chief Psychiatrist to be responsible for overseeing the treatment and care to a range of users of mental health services. The Chief Psychiatrist is required to discharge that responsibility by publishing a set of standards for treatment and care provided by Mental Health Services and overseeing compliance with those standards.

The Chief Psychiatrist of Western Australia has accepted two sets of standards as the overarching standards relevant for the Mental Health Act 2014.

- For clinical mental health services: [National Safety and Quality Health Service](#) (NSQHS) Standards.
 - Implemented from 1 November 2023
- For other mental health services: [National Safety and Quality Mental Health Standards for Community Managed Organisations](#) (NSQMHS for CMOs).
 - In the process of implementation. Until implementation is complete, the accepted standards remain the [National Standards for Mental Health Services](#).

In addition, the Chief Psychiatrist has published the Chief Psychiatrist's Standards for Clinical Care. These standards have been developed within the following context:

- The specific Chief Psychiatrist's Standards are not designed to replace the NSMHS but enhance them where local development is identified as needed.
- They cover certain areas the Chief Psychiatrist deems to be either of central importance or requiring local jurisdictional focus.
- They are designed to leverage quality clinical care and are purposefully and predominantly targeted towards clinical practice.
- They are designed to be easily and quickly read by clinicians, and also by consumers and carers - hence they are relatively brief, not exhaustive.

Version

Purpose	Statutory Requirement under the Mental Health Act 2014
Relevant To	All Mental Health Service Providers
Approval Authority:	Dr Nathan Gibson Chief Psychiatrist
Effective Date:	30 November 2015
Responsible Group:	Chief Psychiatrist Standards and Guidelines Working Group
Enquiries Contact:	Reception, Office of the Chief Psychiatrist Tel: 08 9222 4462

Standard: Transfer of Care

This Standard applies to all public and private mental health services as defined by the *Mental Health Act 2014*.

Definition

A person-centred, recovery focused process used for the timely, safe and effective discharge and handover of care between all service providers. Service providers may include clinical and non-clinical services.

Purpose

To ensure continuity, safety and quality of care for consumers and carers is maintained during transfer either between or within services.

Context

1. Consumers may be at higher risk during transfer of care.
2. The consumer, and where relevant the guardian, will partner in the drafting and ownership of the transfer information is essential.
3. Carer collaboration in this process must always be actively sought.¹
4. Different service providers in the continuum of care may require different aspects of information. Transfer of information will recognize other relevant privacy legislation and policy.
5. The referring service retains the responsibility for the consumer until handover to the receiving service or practitioner or the consumer decides on an alternative process.
6. The mental health service, in conjunction with the treating clinician, will facilitate appropriate follow-up for all consumers within seven (7) days after transfer.
7. When a consumer does not keep the planned follow-up arrangements there must be active consideration and management of risk in accordance with the Risk Assessment and Management Standard.
8. Referral and provision of handover information should occur prior to transfer from the referring service, exceptional circumstances permitting.
9. In the context of appropriate assessment and risk assessment duplicate triaging will be avoided.
10. Any unresolved debate regarding clinical responsibility or appropriateness of transfer, must be resolved in a timely manner and must not impact on safety and access to care.
11. Multiple care plans should be merged wherever possible.
12. Agencies will make every attempt to work collaboratively with each other, in a person-centred approach.
13. The use of standardised transfer of care documents is recommended.

Criteria

Discharge, transfer and equivalent plans will include reference to:

1. A case formulation, including a brief summary of those factors which are essential for understanding the patient as an individual and within their social and cultural environment.
2. Standardised clinical diagnoses.
3. Mental state examination changes from admission to discharge.
4. Therapies used and ceased, including reasons for this, adverse effects and any significant clinical incidents.
5. Physical healthcare assessment and management.²
6. Risk assessment and management.

¹ Consumer Carer Involvement in Individual Care Standard, Chief Psychiatrist 2015

² Physical Health Care of Mental Health Consumers Standard, Chief Psychiatrist 2015

7. Known signs and symptoms which indicate potential mental health deterioration (relapse signature).
8. Contingency strategies/ crisis plans.
9. Post discharge follow-up arrangements.
10. Contact details for consumer, carer and guardian where relevant.

The plans must be clear, directive and suitable for the needs of the consumer and receiving services involved in the individual's care including general practitioners, and other clinical services. Transfer information to non-clinical services should reflect the needs of the consumer within that service.

Measure

1. Transfer summary provided to receiving service

Future/Potential Measures

1. Documented relapse signature and contingency strategy.
2. Information handover prior to consumer exiting the service.

Acknowledgement

The Chief Psychiatrist's Standards would not have been possible without the invaluable contribution from the Chief Psychiatrist's Standards and Guidelines Working Group, and the broader agencies and individuals involved in feedback. Acknowledgement is also made to the Statewide Aboriginal Mental Health Service.

Published by the Chief Psychiatrist of Western Australia.

This document is available as a PDF on the Chief Psychiatrist's website:
www.chiefpsychiatrist.wa.gov.au.

Copyright to this material is vested in the Chief Psychiatrist of Western Australia unless otherwise indicated.