Kamloops Primary Care Waitlist – Priority Access Referral

Important Note – *In order to process a Priority Access Referral, the patient **MUST** be registered on the Kamloops Primary Care Waitlist through HealthLink BC (8-1-1). Priority Access Referrals will not be processed for patients who are not registered.*

Date of Referral		Date Patient Last Seen	

Patient Details

Name			PHN	
Phone # (Primary)		Phone # (Alt)		
Address (Must be within Kamloops Local Health Area)				

Third Party / Alternate Contact

Name:		Relationship:	
Phone #		Phone # (Alt)	

Patient has provided verbal consent/authorization for this individual to be contacted /speak on their behalf	Yes / No
Third Party / Alternate Contact who is authorized to register patient should be contacted first to arrange appointment for patient	Yes / No

Patient Verbal Consent / Authorization

Patient has provided verbal consent/authorization for this information to be shared with HealthLinkBC	Yes / No
Patient has provided verbal consent/authorization for HealthLink BC to share this information with a 3rd party for the purpose of supporting attachment to a primary care provider through the Kamloops Primary Care Waitlist	Yes / No

Priority Access Criteria

Current Priority Issue (details)	
Without rapid access to a primary care provider, the individual is at risk for: (At least 1 required, check all that apply)	_____ Significant deterioration in condition resulting in hospitalization _____ Discharge dependent on further stabilization with primary care provider _____ High risk of readmission following complicated discharge _____ At risk / vulnerable child, adult, family _____ Irreversible health impacts _____ Pregnancy
Medical Summary (Attach relevant reports e.g. discharge summary, lab reports, pertinent diagnostic imaging)	

Authorized Referral Source

Clinician Name (Print)		Signature	
Phone #		Fax #	

Referral Source (check only 1)	___ Emergency Physician ___ RIH Hospitalist ___ Specialist Physician /Clinic Coordinator ___ Walk in Clinic ___ IH Home Health ___ Public Health ___ Community Care Coordinator/Team Lead ___ Specialized Services ___ Acute Inpatient Service ___ MHSU ___ Family Physician / Nurse Practitioner ___ Thompson Region Family Obstetricians

Fax Completed Form To – HealthLink BC/8-1-1 @ (604) 398-4774

*** Incomplete forms will be returned to sender ***

Priority Access Referral for the Kamloops Primary Care Waitlist

About the process:

All Kamloops residents who are without a regular Primary Care Provider and are within the Local Health Authority (LHA) are welcome to register for the Kamloops Primary Care Waitlist (KPCW) by calling HealthLinkBC/8-1-1. Those registered on the waitlist are attached in chronological order based on date of registration to Primary Care providers as space becomes available.

The Priority Access Referral is a way for you to advocate for your patient to bypass the chronological order of attachment, in order for a more urgent placement with a Primary Care provider.

To be considered for priority placement, a patient must live within the Local Health Authority, be registered on the KPCW, and meet at least 1 of the Priority Access Referral Criteria as listed on the referral form.

This process is part of a collaborative approach to patient attachment to Primary Care within the Kamloops area.

Kamloops area residents looking for a regular Primary Care Provider (Family Physician or Nurse Practitioner) should call HealthLinkBC/ 8-1-1 to register. In addition to registering on the waitlist, callers are also able to speak with Registered Nurses who can provide health information and advice including appropriate next steps for addressing their health concerns. Callers can also access Registered Dietitians (including Oncology, Pediatric, and Allergy specific), Qualified Exercise Professionals, and Pharmacists through HealthLinkBC/8-1-1.

Requesting a Priority Access Placement

1) Ensure patient is registered on the Kamloops Primary Care Waitlist. This can be done by calling HealthLinkBC at 8-1-1. Priority Access Referrals cannot be processed if the client is not registered.

2) Complete Priority Access Referral Form (reverse page)

3) Attach relevant reports that could be provided to the primary care provider accepting the priority referral, such as: hospital discharge summary, consult notes, recent lab work, diagnostic imaging.

4) Fax the referral form and relevant documents to **HealthLinkBC/8-1-1 at (604) 398-4774**