

# Sample NACS Referral Forms

## CLIENT REFERRAL FORM

<b>Part A: To be filled by the referring organization/department)</b>		
<ul style="list-style-type: none"> <li>• Please fill out Part A and ask the client to take it to the receiving organization.</li> <li>• Please fill out one form per service/referral.</li> </ul>		
Referral no: _____ Date: _____ Time: _____		
Client name:	Date of birth:	Sex: M F
Referred from (organization or department)	Address Telephone no: Fax no:	
Referred to:	Address Telephone no:	
Diagnosis		
Treatment given		
Reason for referral		
Documents accompanying referral		
Name of person referring the client:		
Position:		
Signature:		
<b>Note to receiving entity:</b> When services have been provided to the client, please fill out <b>Part B</b> below, detach it, and send it back to the initiating entity with the client or by fax.		

-----✂-----Receiving entity should tear off when making **back referral**-----✂-----

## REFERRAL FEEDBACK FORM

<b>Part B:</b> <i>To be filled out by the organization fulfilling the referral and sent back to the referring entity with the client or by fax</i>			
Date:		Referral no.:	
Client name:		Sex: M F	Date of client's arrival:
<b>From</b> receiving entity (organization):		Address:	
		Telephone no:	Fax no:
<b>To</b> entity originating the referral:		Address:	
		Telephone no:	Fax no:
Services provided:			Date:
Name of person receiving the client:			
Position:			
Signature:			Date:
Were services completed as requested? Yes _____ No _____			
Is follow-up needed? Yes _____ No _____			
What follow-up?			
Additional comments:			
Name:			
Signature:			
Date:			

The tool below is used by the Cote d'Ivoire Ministry of Health to supervise referrals among health facilities that implement NACS for people with HIV, the district-level social centers throughout the country, and community service providers.

**SUPERVISION TOOL FOR IMPLEMENTING THE JOINT WORKPLAN TO STRENGTHEN LINKS AMONG HEALTH FACILITIES, SOCIAL CENTERS AND THE COMMUNITY**

1. **Health region** \_\_\_\_\_
2. **Health district** \_\_\_\_\_
3. **Date of supervision:** \_\_\_\_\_
4. **Name of supervisor:** \_\_\_\_\_
5. **Point focal supervised:** \_\_\_\_\_

Name	Structure	Function	Email	Telephone	Signature

**6. Verification of site plan and collaboration entity**

No.	Activity	Results	Source of information	Status			Observation (e.g., reason activity was not conducted or was delayed, etc.)
				Achieved	In process	Not achieved	
1	Verify whether there is a joint workplan (health, social centers, and community-based organizations (CBOs).	Joint workplan available in all sites	Joint plan				
2	Identify the site focal point person.	Focal point person designated for each site	Site activity Log including joint activities				
3	Verify whether social/ community stakeholders are actively involved in district management team meetings.	Social/ community stakeholders participating actively in district management team meetings	Minutes of meetings of district management team				

No.	Activity	Results	Source of information	Status			Observation (e.g., reason activity was not conducted or was delayed, etc.)
				Achieved	In process	Not achieved	
4	Verify whether health care providers are actively involved in meetings of multisectoral stakeholders.	Health care providers actively involved in multisectoral stakeholder meetings	Minutes of multisectoral stakeholder meetings				
5	Verify whether referral linkages are included in meeting discussions.	Referral linkages included in meeting agendas	Minutes of meetings of health staff, social center staff, and CBOs; minutes of meetings of multisectoral stakeholders				

## 7. Verification of implementation of planned activities

No.	Activity	Results	Source of information	Status			Observation (e.g., reason activity was not conducted or was delayed, etc.)
				Achieved	In process	Not achieved	
1	Develop a common timetable for meetings of the team.	Timetable developed	Meeting minutes				
2	Distribute the timetable of team meetings to actors.	Timetable distributed	Activity reports				
3	Update the register of multisectoral stakeholders and referral entities.	Register of multisectoral stakeholders and referral entities updated and distributed	Register				

No.	Activity	Results	Source of information	Status			Observation (e.g., reason activity was not conducted or was delayed, etc.)
				Achieved	In process	Not achieved	
4	Distribute official packages of activities for health facilities, social centers, and CBOs.	Official packages of activities distributed	Official packages of activities for health facilities, social centers, and CBOs				
5	Organize 1-day open house for all structures.	Open house organized	Report of the activities				
6	Develop a telephone directory for health facility, social center, and CBO actors.	Telephone directory developed	Telephone directory				
7	Organize rotating monthly meetings of multisectoral stakeholders.	Rotating monthly meetings organized	Meeting reports				
8	Make referral and counter-referral forms available to all sites.	Referral and counter-referral forms available in all sites	Activity report				
9	Identify a focal point person in each referral and counter-referral site.	Three focal point persons designated	Meeting notes Activity reports				
10	Organize six sensitization sessions on referral and counter-referral procedures during meetings of multisectoral stakeholders.	Six sensitization sessions organized	Sensitization session reports and lists of participants				

No.	Activity	Results	Source of information	Status			Observation (e.g., reason activity was not conducted or was delayed, etc.)
				Achieved	In process	Not achieved	
11	Organize a coaching session for different actors on the use of referral and counter-referral tools.	One coaching session	Coaching session report				
12	Organize a meeting each quarter.	Quarterly meetings held	Meeting minutes				
13	Organize an annual review meeting.	Annual review meeting held	Meeting minutes				
14	Develop and distribute a joint action plan.	Joint action plan distributed	Action plan				
15	Organize two quarterly joint supervision visits.	Two joint supervision visits per quarter	Supervision reports				
16	Include referrals and counter-referrals in district data collection.	Quarterly data collection	Report of activities				
17	Train actors in data management.	Actors trained in data management	Training report				
18	Train referral and counter-referral focal point persons.	Four focal point persons trained	Training report				
19	Organize refresher training sessions and workshops.	Refresher training sessions and workshops held	Training reports				
<b>Total score</b>				<b>Achieved</b>	<b>In process</b>	<b>Not achieved</b>	

**8. Problems in implementation of the plan:**

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**9. Solutions proposed to resolve problems:**

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**10. Suggestions made by supervised staff:**

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