

Guidelines for Cross Regional Referrals

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1. Overview

These guidelines enhance the collaborative working relationship between Entry Points across the state to ensure consistent practice and processes are in place for out of region referrals. The guidelines aim to improve the response to people who are homeless or at risk of homelessness by:

- coordinating service pathways for people referred across regions and Local Area Service Networks (LASNs);
- enabling an understanding and clarify the role and responsibilities of Entry Points when making an out of region referral;
- ensuring there is a shared understanding and commitment to the duty of care, client confidentiality and client rights.

2. Context - Opening Doors

Opening Doors is an area-based service coordination framework. It is a practice and systems approach to providing timely and effective access to homelessness, social housing and family violence services for those seeking assistance.

In the Opening Doors model, 17 Local Area Service Networks (LASNs) have been established across the state. Each LASN has a number of visible Entry Points through which people who are homeless or at risk can access the homeless service system.

Entry Points are designated to cover a local area. However, all homelessness agencies are expected to work with any person who contacts them for assistance, regardless of their area of origin. Area of origin is not an acceptable basis for exclusion from services.' *Opening Doors Service Coordination Guide July 2008, (page 34)*. A person arriving at an Entry Point other than the one in the area on their health care cards should still receive assistance including Housing Establishment Funds (HEF) according to availability and need.

Initial assessment and Planning (IAP) Workers located at each Entry Point undertake initial assessment and coordinate prioritisation and resource allocation for the local network.

The initial assessment focuses on:

- persons needs, risks and vulnerabilities
- assistance to maintain current housing (where appropriate)
- options for housing for the night
- other immediate homelessness related needs and risks

- options for medium and long-term housing

3. Principles

The following principles underpin the Out of Region Referral guidelines:

- Safe, secure, appropriate and affordable housing as a basic human right;
- Access and equity and the provision of services in a manner which does not discriminate on the basis of ethnicity, gender, language, ability, religious or political beliefs, sexuality, family status, age, class, background or health status;
- Uphold service user rights to confidentiality and privacy, and to the provision of high quality services that maximize their opportunities for self determination and autonomy;
- Without underestimating the difficulties posed by duty of care to clients, staff and the community, it is essential services and workers do not systematically exclude people with challenging behaviours;
- A commitment to engage and respond to people seeking assistance;
- Strengthen relationships between services to support the pathways for people transitioning through the service system; and
- Avoid duplication and enhance the service system efficiency whilst maintaining an individualised response to people seeking assistance.

4. Terminology

First Contact Entry Point – The Entry Point a client first contacts for an initial assessment.

Out of Region Entry Point – The Entry Point a client nominates as the Entry Point which they would like to be referred to for ongoing resources.

5. Access and Prioritisation

Client access to the suite of homelessness funded resources is based on the client's identified need and, not the location listed on the person's health care card.

'..... all housing and support resources are prioritised in a way that does not discriminate on the basis of current location of the client'. *Opening Doors Service Coordination Guide July 2008 (page 35)*

Prioritisation works the same way for out of region referrals as cross catchment referrals. That is, the assessment completed and the prioritisation determines access to a local service response.

It is not appropriate to reject an assessment because there are no current resources available. Undertaking an assessment is based on need and client preference, not on available resources.

6. Referral Pathways

Referrals may be initiated for any reason by a client and/or an Entry Point. Typical referral pathways and good practice responses include:

6.1 Accessing services/resources outside the local catchment area

A client contacts an Entry Point but prefers to access homelessness resources out of that Entry Points region

- Where the client contacts an Entry Point regardless of the region the client resides in or outside the region the client has listed on their health care card then the IAP worker will offer to undertake an assessment with the client.
- The client should be provided with the option of making contact with an IAP worker in the region they wish to reside in.

- If an assessment is completed at an Entry Point outside the region the client wishes to reside in then the First Contact Entry Point is responsible for faxing the assessment through to the Out of Region Entry Point.
- The Out of Region IAP Referral tool will be used for this. During the assessment the First Contact Entry Point IAP Worker will contact the Out of Region Entry Point to establish the process and any potential limitations to a service response. Ideally, this will occur via a three-way conference with the client present.
- The First Contact Entry Point will maintain contact with the client as per local prioritisation practice. The First Contact Entry Point will prioritise the client for a service response in the local region until resources (including interim response) are secured through the Out of Region Entry Point or the client is determined to be 'inactive'.
- The Out of Region Entry Point will prioritise the client for all available resources including interim response. The prioritisation process should ensure it does not discriminate or exclude a client as they are not currently residing in the local area.
- The First Contact Entry Point will advise the Out of Region Entry Point on any changes for the client which is likely to impact on the prioritisation of resources for the client.

6.2 Returning to the local catchment area

Where a client is referred to crisis supported accommodation or other support services out of their preferred catchment but requires transitional support and accommodation options in their preferred catchment on exit, the client's assessment will remain on the prioritisation list at the Entry Point the client has nominated as the preferred catchment to reside in over the long term. The client will remain on this prioritisation list until a resource is secured or the client is determined to be 'inactive'. The local Entry Point will maintain contact with the client as per local Prioritisation practice.

The out of region crisis supported accommodation provider or support service should advise the referring Entry Point if anything changes for the client that is likely to impact on their prioritisation for local resources. Feedback should be faxed to the relevant Entry Point using the IAP referral tool.

- Out of Region Entry Point to complete the Opening Doors initial assessment and referral form (see appendix one for CMS form and appendix two for word format IAP form) and forward to local Entry Point;
- Out of Region Entry Point to check the resource register to ensure the referral meets the eligibility criteria for the receiving service;
- Out of Region Entry Point to fax the referral through to the local entry point and contact by phone to discuss the referral;
- Local Entry Point to include person on the prioritisation list;
- For a full list of entry points go to <http://www.housing.vic.gov.au/homelessness-and-family-violence/getting-help>)

7. Referral Process

1. Where a client contacts an Entry Point by phone or in person the IAP Worker establishes whether the person needs initial assessment for homelessness assistance – are they in the right place?
2. First Contact Entry Point uses the IAP Referral Tool (Attachment 1) to make a referral to the appropriate Out of Region Entry Point. This form incorporates the IAP Assessment (Attachment 2) and should be completed in full. Fax the IAP tool to the out of region Entry Point.
3. The Out of Region Entry Point places the client on the Prioritisation List for resources.

4. The Out of Region Entry Point needs to ensure that the referral is maintained on the Prioritisation List until such time that a service is facilitated or the client becomes 'inactive' as per local prioritisation practice.
5. Where a client is determined to be inactive and a service response has not been facilitated, the receiving Entry Point will need to advise the referring Entry Point of the situation.

8. Transfer of client information

Clients should always be asked how much detail should be included in the referral and specifically if there is anything they do not want to be passed on. A signed copy of the CMS consent form must accompany any information being transferred between Entry Points. The summary of information should include the Initial Assessment & Planning Form which identifies:

- Needs and risks
- Housing assistance provided or planned
- Support needed or arranged.

Entry Points to negotiate the transfer of information based on the system each service has in place and the guidelines set out in the *Information Privacy Act 2000*.

9. Privacy and Confidentiality

Two pieces of legislation related to protecting private information are;

- I. *The Information Privacy Act 2000*, which applies to the treatment of all personal information collected about clients
- II. *The Health Records Act 2001*, which relates to the treatment of any health information collect about clients.

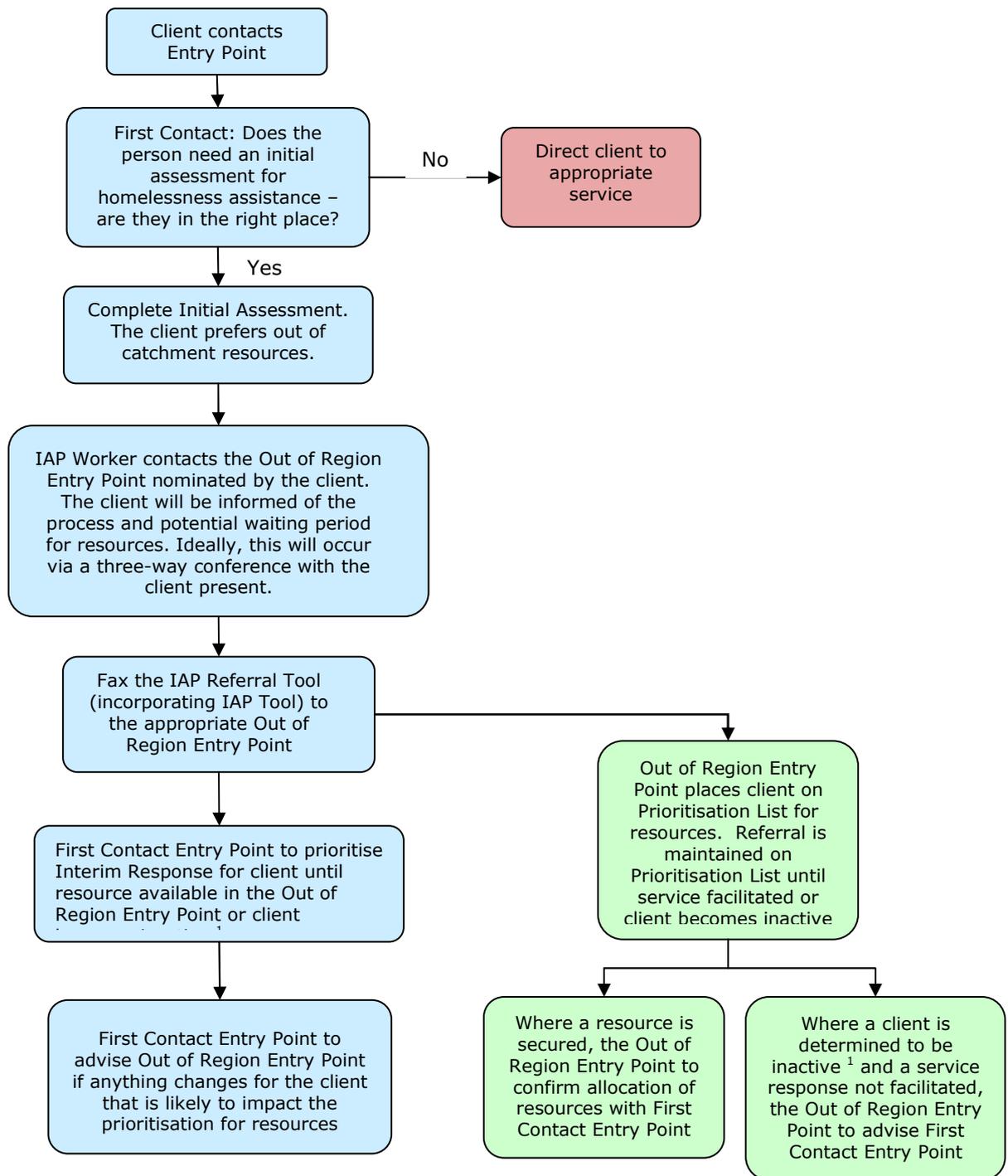
- Confidentiality of information, which relates to clients, is acknowledged by Entry Points
- All agencies acknowledge and will be fully compliant with *The Information Privacy Act 2000*, *The Health Records Act 2001*
- All information collected should be with the client's informed consent about how this information will be used. You should ask for the client's consent to the use of their information at the end of the initial conversation with the client, which includes consent for referrals (using the CMS referral form and consent form)
- Information relating to the client will only be exchanged between the Entry Points
 - If the client has given consent (verbal or written), CMS consent form to be used and made available by the referring service. If the service does not have access to CMS they may choose to use an alternative consent form (SAAP or SHASP)
 - Information must be relevant to the service being provided
 - Information is relevant to the safety of the client or workers
 - Information is relevant to the duty of care considerations of the client
 - If the client does not provide consent for the transfer of information the assessing service will advise the client how they can contact specific services and advise of other options available

10. Dispute resolution

- As a first step, dispute resolution is the responsibility of the relevant Agency Manager/s in conjunction with representatives on the LASN
- As the second step, dispute resolution is the responsibility of the relevant Agency CEO/s
- Each party agrees to raise any issues quickly and the other to respond within 5 business days
- The dispute may be raised with the LASN
- during the term of any dispute, the parties will continue to meet their obligations under this protocol

- The dispute may be referred to the Department of Human Services regional Program and Service Advisor Department of Human Services region, the region will meet with parties to discuss the issue/s and seek resolution strategies
- Learnings and issues raised during a dispute resolution process should be reviewed by the LASN.

Appendix one
CROSS REGIONAL PATHWAYS FLOW CHART



¹A client no longer requires resources or is not contactable as per local LASN model



Initial Assessment and Planning form

Referral To

Agency Name: Please select from the drop down options
Or
Staff Member:
Email address:
Fax Number:
Service:
Vacancy:

Referral From

Agency Name: Please select from the drop down options
Or
Staff Member:
Phone Number:
Fax Number:
Email Address:
Date Referred:

Client Contact Details

Client ID:
Client Name:
Preferred Name/Alias:
Address:
Date of Birth:
Gender:
Phone No:
Mobile No:
A message can be left on message bank: Y N
Can a worker call you on this number and leave a message?
Alternative contact details
Country of Birth
Indigenous Status
Source of Income
Labour force status
Student status
Date of assessment
Is an Interpreter required?
If yes provide further information:

Household members

Other Name:	Surname:	Relationship	Gender	DOB <i>put year only if estimate</i>
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Service Contact

Date of initial assessment:

Service Contact Setting: **Agency**

Office Location (insert own office drop downs)

Summary

Is an interpreter required Y N

If yes please provide further information

Needs and Risks
(Free Text)

Response Provided (include housing assistance provide or planned and supports needed, provided or arranged)
(Free Text)

Next Steps
(Free Text)

Main Reason for Seeking Assistance
Don't know/no information

Living arrangements before Service Contact
With both parents

Housing Type Immediately Before Service Contact
Improvised dwelling/car/tent/squat

Tenure Type Immediately Before Service Contact
Crisis accomodation (SAAP/THM)

Assistance Needed/Provided/Referred

Assistance to Access Housing

	Needed	Provided	Referred
Crisis/short term emergency accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transitional Accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long term community housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long term private rental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long term other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Support

Housing Advice and Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy/Liaison OoH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy/Liaison – Private Rental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy/Liaison – Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living skills/personal development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional support/other counselling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assistance with VCAT hearings/other legal issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Needed	Provided	Referred
Culturally specific support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpreter services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Opening Doors – Guidelines for Statewide/Multi-area services and local entry points

- Assistance with Immigrant issues
- Assistance to obtain government benefit/pension
- Financial Assistance/material aid (including HEF)
- Financial counselling and support
- Other (Please Specify)

Referral to Specialist Services

- Employment and training assistance
- Incest/Sexual assault support
- Family violence support
- Assistance with problem gambling
- Parent support
- Psychological services
- Psychiatric services
- Pregnancy support
- Family planning support
- Drug/alcohol support or intervention
- Physical disability services
- Intellectual disability services
- Health/medical services
- Other (please specify)

Referral to Housing Support

- Crisis accommodation support
- Transitional Housing support
- Long Term Tenancy support
- Other Housing Support

Client consent to share information

To record freely given informed client consent to share their information with a specific agency/ies for a specific purpose

Name:

Date of Birth:

Sex:

Section 1: Proposed Information Uses and Disclosures

1.1 Referrals

The following service(s) are recommended. It is also recommended that relevant information is forwarded to the agency(s) that provide these services, in order that consumers receive the best possible care.

Service Type Eg. - Housing support - Drug & Alcohol support	Name of Agency	Type of information (including limits as applicable) Eg. - All relevant information - Housing situation only

1.2 Victorian Homelessness Data Collection

Consent is sought for information about clients and the services they receive to be recorded by the agency and sent in a format that *does not identify the client* to the Australian Institute of Health and Welfare, for statistical reporting purposes.

Section 2: Record of Consumer Consent

2(a) Verbal consent

Worker Use Only

Verbal consent can be used when it is not practicable to obtain written consent.

I have discussed the proposed referrals with the consumer or authorised representative and I am satisfied that the consumer understands the proposed uses and disclosures, and has provided their informed consent to:

Referrals

Signed

.....
(Worker)

Date/...../.....(dd/mm/yyyy)

Worker name:.....

Position:.....

2(b) Written Consumer Consent

My worker/practitioner has discussed with me how, and why certain information about me may need to be provided to other service providers. I understand the recommendations and I give my permission for the information to be shared as detailed above.

Signed

.....

Signed by Client or Authorised representative

Date/...../.....(dd/mm/yyyy)

Name:.....

Witnessed:.....
(worker)

Worker Name.....

Position:.....

Informed of privacy/confidentiality & storage of personal information Y N
 Provided with hard copy of clients rights and confidentiality Y N