

INFORMATION EXCHANGE & REFERRALS

POLICY

The care and protection of participants is dependent upon shared information and access to accurate and relevant information that will assist organisations working with people with disability, especially when assessing risk, making decisions and identifying and delivering appropriate services

Riverlink Interchange Inc. (Riverlink) ensures that its support and services are tailored to the needs of individual participants, their carers and families and that they are designed to achieve positive outcomes for the participant. To that end it shares information with other organisations and receives referrals from potential clients, other Riverlink clients or from other agencies.

PROCEDURES

The Administration Assistant will be responsible for maintaining an accurate and current contact and referral database through CIMSability, Riverlink's computerised Client Management System.

EXCHANGING INFORMATION AND MAKING A REFERRAL

Voluntary out-of-home care agencies are authorised to exchange information that helps deliver services and supports to promote the safety, welfare and wellbeing of a child or young person. Agencies are only expected to share information with other prescribed bodies involved in the safety, welfare or well being of children and young people who are currently in, have been in, or are being assessed for voluntary out-of-home care.

Exchanging information with other providers ensures more consistency in approach to achieving the goals for the participant. Making referrals can be informal by providing the client with contact information about other services or agencies.

Contact with other agencies for the purpose of obtaining or sharing information must occur with the permission of the carer. Information exchange under Chapter 16A of the Act can be: in writing via letter; by fax or email; or orally over the phone or in person.

When contacting another agency, the staff member making the contact will:

1. Identify the person that the information request concerns. If it is not the participant, identify the person's relationship to the participant.
2. Explain how the information requested relates to the safety, welfare or wellbeing of the participant.
3. Explain why the information will assist the agency to make a decision, assessment or plan, or to initiate or conduct an investigation, or to provide any service, or to manage any risk to the participant.
4. Provide a sufficient level of detail to assist the prescribed body to understand the purpose of the request and to locate the relevant information in an efficient manner.
5. Provide background to the request/direction, including whether or not the agency has informed the participant or parent(s) that the information has been sought and if not, why not.
6. Indicate the time period for which the information is sought (e.g. for the last 6 months) and the type of information sought.
7. Provide a realistic timeframe for the prescribed body to provide the information - negotiating a due date can ensure urgent matters are prioritised.
8. Preferably contact the prescribed body by phone before making the request to discuss the agency's needs and to ensure the request is well targeted.

A voluntary out-of-home care agency that receives a request for information under Chapter 16A of the Act must provide the requested information if it reasonably believes providing the information may assist the agency and there are no reasons to refuse the request.

A voluntary out-of-home care agency is only required to provide requested information that it holds – it is not obliged to collect information to respond to a request.

TAKING REFERRALS

When taking a new referral the Administration Assistant creates a new file in CIMSability named after the participant (Surname, First Name) and adds it in the Potential Participant Program. The following information needs to be collected:

- Who is making the referral e.g. self referral or is the referral being made on behalf of a carer by e.g. a Case Manager.
- If it is not a self referral ask if the person has permission to give Riverlink their details.
- Complete the Intake Form and enter in CIMS:
 - 1) Participant details
 - 2) Carer/Next of Kin details
 - 3) Participant's diagnosed disability
 - 3) Participant information

A progress note is made by the Administration Assistant of the conversation with the date and time of the call and all the information received in the phone call.

The Administration Assistant then forwards this to a Service Coordinator who makes an appointment and undertakes a phone assessment. (See 2.07 Intake and Review policy).

MAKING REFERRALS

Making referrals can be informal, by providing the client with contact information about other services or agencies.

In addition formal referrals are made to other agencies with permission of the carer.

When a formal referral is made to another agency, the staff member making the referral will ensure that:

- confidentiality and privacy of the client is maintained at all times;
- they have clarified with the client the service needs they have expressed;
- the client is given an accurate picture of the other agency and its service;
- the other agency is given full and honest referral information;
- some information may be put in writing when appropriate;

- records of contact with the client and the other agency are kept; and
- a progress note of the referral is made in the participant's file.

Other referral procedures may include:

- making contact with an agency on behalf of, or with clients who are self referring; and
- follow up with the client or other agency about the appropriateness and suitability of the referral.

Related Forms:

Intake Form

Participant Assessment Form

Participant Profile

Related Policies:

2.05 Service Access

2.07 Intake and Review

2.09 Prioritising Requests for Service

2.11 Individual Need

2.08 Service and Activities Fees

Relevant Standards:

NSW Disability Service Standards:

Standard 1; Rights

Standard 2; Participation and Inclusion

Standard 5; Service Access

National Standards for Disability Services 2013:

Standard 1; Rights

Standard 2; Participation and Inclusion

Standard 5; Service Access

Children's Standards in Action:

Standard 1; Service Access

Standard 2; Individual Needs

Legislation:

Children and Young Persons (Care and Protection) Act 1998

Disability Services Act (NSW) 1993



Ray Palmer

Executive Officer

Date :



