



FIRST STOP CENTRE

Referral and Assessment Process

Referrals

1. *Telephone Referral.* On receiving a referral, the Manager or the designated staff member will complete the initial referral form (Appendix A). The form should be used as confirmation of services/tasks.
2. *Written Referral.* Information from the written referral will be transferred to the initial referral form. This will enable the Centre Manager or designated staff member to identify gaps in information and to seek clarification from the client.

Assessment

3. An assessment of visitor needs and a risk assessment should be completed before a service commences. Assessments should be completed by the Manager or staff member designated by the Manager who has the appropriate skills.
4. Thorough assessment will enable the Centre Manager to allocated a staff member appropriate to the needs of thre visitor, taking into consideration the visitor's wishes, cultural and gender requirements and any other relevant matter.

Visitor Needs

5. In assessing the needs of the visitor, the following areas of need should be identified, using the relevant assessment form.
 - Visitor's characteristics and choices
 - Amount of help likely needed
 - Type of help needed
 - Timing of help, particularly in relation to Centre's opening hours
 - What other services received elsewhere by the visitor
6. Any discrepancies or suggestions for other services identified should be noted and made known to the staff member undertaking the service provision.



Risk Assessment

7. Risk assessment includes determining potential risk to the visitor and to others. Such assessment should be completed using the risk assessment form. For the purposes of risk assessment, the information gathered has to be comprehensive and as accurate as possible.
8. Following assessment, any areas of concern or issues of safety must be communicated to the named assessor/purchaser.
9. In the event of areas of grave concern, the Manager has the right to refuse to provide a service until the issue(s) causing concern have been rectified.

Monitoring and Reviewing

10. All care plans should be reviewed after an initial six weeks following commencement of service. This review is initiated by the named assessor. Subsequent care plans should be reviewed annually, or following any change in the visitor's circumstances. If the named assessor does not initiate subsequent reviews, the Centre Manager should do so.
11. Reviews should involve the visitor, his or her formal and informal carer, the named assessor and any other professional involved, e.g. the General Practitioner.
12. Monitoring should occur every three months to ensure that the visitor is receiving the service needed and that it is performed in a manner that meets expectations and to the requisite standard.
13. Throughout the monitoring and reviewing process the visitor and or his or her advocates should be encouraged to make their views and opinions known to the provider. Positive visitor involvement is one method of ensuring the quality of the service outcome.



APPENDIX A

REFERRAL FORM

Name of visitor:

Address:

Tel No:

Date of Birth:

Ethnic group:

General practitioner:

Name:
Surgery address:

Tel No:

Other Primary Health Care
providers:

Name:

Tel No:

Primary carer:

Name:
Tel No:
Address:

Next of kin:

Name:
Tel No:
Address:

Source of referral:

Self referral
Relative/friend
Local/Authority/S/Services

Department – what team

Hospital Team
Others



Is the visitor aware of this referral?

If not, why not?

Marital status:

Single
Married
Divorced/separated
Widowed
Partner

Types of Household:

Lives alone
Lives with others, if so who
At involvement with care

Type of accommodation:

Visitor's situation:

Carer's situation:

Description of support required:

Time of services:

Degree of visitor mobility:

Medication, including any special diets:

When is service to commence:

How long for?

Can assessment be made before a service commences:

Yes/No



If yes, direct contact with the visitor?

Liaison with whom?

Has a risk assessment been completed? (either by referrer or First Stop)

NAME OF REFERRER:

CONTACT NO: