MAKING A REFERRAL

LOGIN SCREEN

This is the first screen to access the system. The Login is a two screen system for added security. Screen 1 is your username and password.

theseus First
Login (1 of 2)
JuliaQuit52
<u>,</u>
Login
Forgot password or account locked?

** If you cannot remember your password click the forgot password link to reset your own password. If you enter your password incorrectly 3 times then your account will lock and you will need to contact your admin user to reset your password for you**

Screen 2 asks you for random letters from your security questions.

(P) these	US First Contact Plus				
Login (2 of 2)					
Security Question: What is your oldest siblings middle name?					
 Please select the character from the dropdown menus provided, NOT by typing them. You will need to select the following characters from your answer to the security question: 					
2nd character:	~				
3rd character:	~				
5th character:	~				
Submit					

HOMEPAGE

Once you have logged in you will see 2 boxes (Make a referral & Referrals Sent). To make a new referral to First Contact Plus click Make a referral.



CONSENT STATEMENT

There are two screens. Screen 1 is the consent statement, you cannot make a referral unless you have the consent of the client.

The consent covers making the referral to First Contact Plus and our partners, holding the client's data on our system, consent to contact the customer for initial call and follow up, consent for the outcomes to be returned to First Contact Plus and viewed by the original referrer

	Make a Referral (1 of 2)
lr	nformation given on this form will be used for the purposes of providing the client with better
si	upport and services.
B	y providing the information on this form the client agrees that we can hold this information on
ti	heir behalf.
lt	: will be held on a computer system run by Leicestershire County Council in accordance with the
D	bata Protection Act.
lt	will be shared on a need to know basis with other agencies involved in providing the client with
si	upport services.
T	hese agencies may include Government Agencies, Borough/District Councils, Health, Fire &
R	escue Service, Police and Voluntary Sector.
T	he client consents to their information being shared with First Contact agencies and to be
C	ontacted in the future regarding the services they have received.
T	he client also agrees for the partner agencies to inform First Contact Plus and the original referr
o	f any actions taken.



REFERRAL FORM

On this screen you will enter the referral details

Referrer details – Your name and job role will auto populate. Please add your team and contact number (Contact Number is mandatory). Please do not use acronyms for you team e.g. ASB team, please write antisocial behaviour

theseus (first contact)	Make a Referral (2 of 2)	Ξ
Referrer Details		
Referrer Name	Petunia Petal	
Job Title	Outreach Worker	
Team		
Contact Number REQUIRED		

Referral details - This is where you can explain what are you referring the client for/ What need did you identify? These are - broken up into 8 themes

Falls

Families & Relationships Work, Learning & Volunteering Living Independently Improving Your Health Feeling Safe Money, Debt & Benefits

Your Home

Clicking on a theme will generate a list of sub-themes you can select. You can select multiple subthemes for the same theme and multiple themes.

Please enter any supporting information in the additional information box that you think is important for the referral e.g. wants to get back in to learning

The direct referral box is there for **health professionals only** who have already done their assessment of need for an improving your health area and provided information to the client. E.g. a GP referring for substance misuse.

Client Details – Please enter the details for the client. One form of contact, either telephone number or email is mandatory.

The district the client is resident in is mandatory however there is the option to select no fixed abode for a client which will open a free text box for you to record details e.g. sofa surfing or confidential address.

Please record any communication needs you feel we should be aware of e.g. Hard of hearing or if the client's first language is not English. If the client does not speak English please be aware that we will require a greater level of detail in the supporting information box as we will not be able to gain this through a call.

(in these us free a Referral (2 of 2)				
Client First Name REQUIRED	Enter Client First Name			
Client Surname REQUIRED	Enter Client Surname			
Date of birth REQUIRED	Day V Month V Year	\sim		
Gender REQUIRED	Please Select a Gender	~		
NHS Number	Enter NHS Number			
Preferred method of contact	Phone Email			
Client Phone Number REQUIRED	Enter Client Phone			
Client Email	Enter Client Email			
Preferred time of contact	Preferred time of contact between 9am-5pm			
	Enter a preferred time of contact			
Please Select a District REQUIRED	Select a District	\sim		
No Fixed Abode REQUIRED	Yes No			
Client House Name/Number REQUIRED	Enter Client House Name/Number			
Street Name REQUIRED	Enter Street Name			
Postcode REQUIRED	Enter Postcode			
Communication needs	Enter any communication needs			
Risk Selection?	Yes No			
	Print First Send			

If you are aware of any risks to organisations or individuals who may visit the client please record them here e.g. verbally abusive, visit in pairs.

At the bottom of the referral form there is a button to allow you to print a hard copy of the form for your own records. This must be done prior to sending. When you click send the referral will be securely delivered to First Contact Plus.

REFERRALS SENT

This area allows you to review previously sent referrals and check them for updates.

When you send a referral, it will take you through to the referrals sent area and a green bar will appear at the top of the screen to let you know the referral has been sent successfully. It will also show you the list of referrals you have previously made. The list will show you client name, the date the referral was sent, the areas referred for and the status of the referral. Specific clients can be searched for or you can filter the list by status to show you referrals which are new, accepted or declined.

(in these us from the seus Referrals Sent			≡	
K Back to Homepage				
Filter by name		Any status 🗸 🗸		Print this list
Date (Sent)	Name		Category	Status
Date (Sent) 23 SEP 2016	Name Tim Taylor		Category Adult Learning; Substance Misuse (Alcohol and Drugs)	Status
Date (sent) 23 SEP 2016 21 SEP 2016	Name Tim Taylor Emma Chouhan		Category Adult Learning; Substance Misuse (Alcohol and Drugs) No Areas of Concern	Status ACCEPTED NEW

Status - There are 3 different status types. Referrals with a **"New"** status have been sent but First Contact Plus have not yet accepted it. Referrals with a status of **"Accepted"** have been accepted by First Contact Plus who will contact the client to discuss the areas of need identified. Referrals with a status of **"Declined"** have been declined by First Contact Plus. First Contact Plus rarely declines referrals however this could happen if the client is out of county, below the age of 16 and or duplicate referrals where there are no new issues identified. Clicking on the client name bar will show the referral detail and at the bottom under "Updates" you would be able to see the reason the referral was declined.

Status	Fred Flintstone 01/01/1940 TMale				
	Address: 1 , Cave Avenue, LE14 8PP				
	Address Notes: No notes recorded				
	Agency Referred To: First Contact Plus	Referral Type: Client Referral	Referral Status: Declined	Date Sent: 13/09/2016	
	Direct Referral : No	Time of Contact : E mail anytime	Method of Contact : Email	Communications Needs : Hard of hearing	
Reason for	Risk Selection : Yes	District : Harborough	Referrer Name : Lisa Manley	Referrer Job : Partnership officer	
recorded by First	Referrer Team : Outreach	Referrer Contact : 0116 305 8365			
Contact Plus	Risk Selection Notes : Any home visits should be with 2 people as Fred can be verbally abusive				
	Additional Notes : Drinks 2 bottles of whisky a day & would like help to reduce this. Is interested in learning how to cook a meal				
	Referral Categories : Adult Learning; Substance Misuse (Alcohol and Drugs)				
	Updates: 13/09/2016 - Lisa Manley (First Contact Plus): Duplicate referral				

You can review the details of any referral in the sent referrals area and check them for updates by clicking on the name bar.

theseus First	Я			Referral Details		
	Alice Smith 01/01/1970 🍨 Female					
	Address: 1, Long Lane, LE19 4SA					
	Address Notes: No notes recorded					
	Agency Referred To: First Contact Plus	Referral Type: Client Referral		Referral Status: Accepted	Date Sent: 20/09/2016	
	Direct Referral : No	Time of Contact : Afternoon		Method of Contact : Phone	Communications Needs : Hard of hearing	
	Risk Selection : Yes	District : Blaby		Referrer Name : Lisa Manley	Referrer Job : Partnership officer	
	Referrer Team : Testing Team	Referrer Contact : 0116 305 1234				
	Risk Selection Notes : Verbally abusive, visit in pairs					
	Additional Notes : Interested in GCSEs. Drinking 1 bottle of whisky a day					
	Referral Categories : Adult Learning; Substance Misuse (Alcohol and Drugs) Updates: 20/09/2016 Client has been referred to Turning Point - Drug & Alcohol Service 20/09/2016 Client has been referred to Leicestershire Adult Learning Service					

Name, D.O.B and gender appear at the top with address underneath. Agency referred to will always be First Contact Plus and referral type will always be client referral.

The updates section at the bottom of the page will update in real time to show when the referral is accepted by First Contact Plus & what onward referrals have been made as a result, including which member of First Contact Plus team made them.

** Currently under development – Development is taking place to allow you to see the outcomes recorded by the referral receiving agencies. Once this is complete it will show under the updates section of the client record**

SAVING A REFERRAL

If you want to save a copy of the referral, click on Print this page, then right click on the opened document and select Save as.

NB Please ensure that any documents are saved and stored in line with GDPR regulations.