

COMMUNITY OPTIONS REFERRAL FORM GUIDELINES

The referral form has 3 pages: page 1 requires client details; page 2 requires information about the referring agency and other details; page 3 requires carer's details.

1. When planning for your client to access Community Options' programs and services, you may wish to call a service coordinator to discuss the client's eligibility and support requirements. The service coordinator will assist you in making a referral.
2. Referrals will not be processed until all the information requested on the referral form is made available. Please, note that you only need to complete page 3, if you make a referral for respite care services. If the client has dementia, please provide information on dementia type, date of diagnosis (if known) and any associated behaviours in Relevant Health and Social Issues section.
3. At an intake meeting, which will take place soon after receipt of the completed referral form, Community Options will consider your client's eligibility to our programs and services. We will also determine which program best suits the client's needs and allocate a service coordinator. Your assessment of the client's likely needs will be taken into account.
4. The service coordinator will advise you about the outcome of your referral. If your referral is successful, the service coordinator will also inform you under which program the client will be receiving support from Community Options.
5. It is essential to explain to the client that the information will be provided to Community Options in order to set up support services. The client or an appropriate representative will need to sign the consent (page 2). In extenuating circumstances, a verbal consent will be acceptable. In such cases, a carer may act on the client's behalf.
6. Print the information clearly so that the information can be read when the referral is faxed to Community Options.

If you have any further questions, do not hesitate to contact us, as incomplete referral forms will be returned.