SUPPORTED ACCOMMODATION FOR MEN

LINDISFARNE STREET PROJECT

REFERRAL PACK

CONTENTS

1. Referral form, including risk assessment.
2. Application form, to be completed by the potential resident
3. The aims and objectives of the project and referral criteria.
4. Information about the project for agencies and applicants.
5. Details of how to refer to the project

We would like you to give as much information as possible about the person you are referring. We expect honest, accurate information, so that we can make an informed decision. We are unable to consider applications without a fully completed risk assessment. We will treat all information fairly and sensitively and use it only to: -

1. assess whether we can provide the right level and type of support, and
2. assess any risks to the applicant, staff or other residents.

We will treat all information you give us as confidential

Please send all completed referral and applications to:-
Impact Housing Association,
Lindisfarne Street Project,
64 Lindisfarne Street,
Carlisle

IMPACT HOUSING ASSOCIATION

REFERRAL FORM

AGENCY MAKING REFERRAL

Agency

_____

Contact person _____ Tel no _____

What support can you offer? _____

PERSON YOU ARE REFERRING

Name _____

Address _____

_____

Tel no. _____

Age _____ Date of birth _____

Male/Female _____ National Insurance No. _____

Names and ages of any children

_____

_____

_____

Are any of the children on the Child Protection register? _____

Name of G.P. _____

Medical conditions _____

Current prescribed medication _____

HOUSING

Where is the applicant living at the moment? _____

What is the reason for homelessness? _____

Has the applicant been referred previously? _____

Has the applicant ever been evicted from supported accommodation? _____

If yes, please give details _____

_____

CONTACTS AND EXISTING SUPPORT

Is he/she in regular contact with any family members? Yes/No If yes, please give details such as name, address, relationship etc…….

_____

_____

If he/she gets support from any other agency please give details

Agency name _____

Contact details _____

INCOME AND BENEFIT STATUS

Is he/she in - employment/training/receiving JSA/receiving Incapacity benefit/other benefits

Please give full details, including weekly earnings

_____

_____

_____

SUPPORT NEEDS

Please tell us about any known support needs this person has

SUPPORT NEED	HIGH	MEDIUM	LOW
Health issues			
Learning difficulties			
Mental health			
Literacy problems			

Living skills			
Budgeting/debt problems			
Drug/substance abuse			
Alcohol			
Other			

Please give details of what you know about the involvement of this person with drugs, including any past or present substance abuse

_____

_____

Please give details of what you know about the involvement of this person with alcohol, including the current position

_____

_____

Are there any mental health problems that you are aware of? _____

_____

Name of psychiatrist/CPN _____

OFFENDING BEHAVIOUR

Does he/she have any offending history that you are aware of? Yes/No
If yes, please give details, including any convictions

_____

_____

If he/she has a probation officer, please give details

Name _____ Address _____

Tel no. _____ _____

Does he/she have any history of threatening behaviour, including verbal and/or physical abuse?

Details _____

_____

Do you know of any other information that is relevant to us in considering him/her for re-housing? Please give details

_____

_____

_____

_____

_____

RISK ASSESSMENT

Category of risk

Low **High**

Deliberate self-harm

Seriousness										
Likelihood										

Harm to others

Seriousness										
Likelihood										

Self neglect

Seriousness										
Likelihood										

Exploitation by/to others (please state which)

Seriousness										
Likelihood										

Description of risk

Trigger points

Assessment of risk

Work carried out with the applicant in relation to the risk/future support offered

I declare that the information I have given above is a full and honest account of my knowledge regarding the applicant

Signed _____

Date_____

IMPACT HOUSING ASSOCIATION

APPLICATION FORM FOR SUPPORTED HOUSING

We need you to fill in as much information on this form as you can. This will help us decide if we can offer you a place in the project.

We only ask for information we need. We will keep confidential everything you tell us. We will only share it with other agencies if you agree.

We will also get information about you from the agency that referred you in the first place.

If you need help with this form, please ask the person who is referring you.

ABOUT YOU

Your name

_____

Your address

_____

_____

Your age _____ Date of birth _____

ABOUT WHERE YOU LIVE

Where are you living now? _____

How long will you be able to stay there? _____

YOUR SUPPORT NEEDS

Please tell us which of these you would like support or help with

Housing		Drugs/alcohol dependency issues	
Benefits		Social/leisure activities	
Training/Employment		Feeling good about yourself	
Health and Mobility		Contact with family	
Healthy Living		Relationships	
Dealing with stress		Cultural and faith issues	
Reading and writing		Parenting	
Cooking, cleaning, shopping etc		Feelings of loneliness/isolation	
Budgeting/debts		Dealing with other agencies	

Is there anything else you need help with?

_____

What do you hope to gain while living at the project?

_____

_____

_____

SUPPORTED HOUSING

If we offer you a place on the project it will be with support. We will expect you to work with us to agree how this will happen.

1. Will you agree to draw up a plan with a housing support worker to meet your support needs. Yes/No

If no, please tell us why not. This may mean that we cannot give you a place at the project

_____

_____

WHAT HAPPENS NEXT

We will look at the information you have given us and the information provided by the agency that referred you.

We will make a decision about whether to house you in the project within 3 days and let you know.

Signed _____ Date _____

If you are happy for us to share this information with relevant agencies, or ask them for other information, please sign below as well after reading this statement.

I agree to Impact Housing Association discussing and sharing relevant information with other agencies if needed to assess my application for housing.

Signed _____ Date _____

Men's Supported Accommodation in Carlisle

Lindisfarne Street

Aims

The projects provide housing with support for males, over the age of 16, who are homeless, in housing need or vulnerable in other ways.
We provide a safe, secure environment, with a high quality of support and services, which allows the men to make informed choices and live as independently as they are able. We expect that men will move on from the project to suitable permanent accommodation that meets their need within 2 years of moving into the project.

The services we provide

The project can accommodate 16 men, in 3 units, each with communal lounge, kitchen, bathroom and toilet. They are let on a licence agreement.

Impact Housing will:

- Provide high quality, comfortable and well-maintained accommodation
- Provide support services appropriate to individual need
- Support men and give access to services around the clock
- Link resident to other agencies and specialised help
- Make sure that staff have appropriate training and specialist skills that are relevant to the needs of the residents.

We will consider referrals from statutory and voluntary agencies. In deciding on who to house in the project Impact will take into account the need to keep a balance between the needs of the residents and the availability and intensity of support provided. The men must be willing and able to work with the support on offer.

We are unable to consider referrals from anyone with

- **A history of arson or violent conduct**

The Support Service

Each resident develops, with the help of his keyworker an individual support plan to meet his needs. We provide support and help in the following areas:-

- Benefits advice
- Money management
- Advice on drug/alcohol dependency problems
- Health issues
- Accessing leisure and other community facilities
- Housing options
- Directing the men to other specialist help and support when needed

Resident’s rights

Each resident will be housed under the terms and conditions of a licence agreement. Their rights are set out in this agreement and in the Residents Charter we give out when they move in.

We are committed to consultation with residents and to giving them the opportunity to be involved and participate if they want to.

We value each resident as an individual and promote respect for others and themselves.

IMPACT HOUSING ASSOCIATION

SUPPORTED ACCOMMODATION IN CARLISLE

HOW YOU CAN MAKE A REFERRAL TO A PROJECT

We operate a standard referral procedure at our projects. We aim to reach a decision about all referrals within 7 working days.
The procedure you need to follow is set out below:-

1. Check the aims and objectives of the project to see if it is suitable for the needs of your client

2. Telephone the project for information about what we can offer and how suitable your referral is

3 Send a completed referral form to the project. This must be fully completed with honest, accurate information. We are unable to consider incomplete forms

4 The risk assessment must be included with the application. We are unable to consider referrals that do not have a fully completed risk assessment

5. We will contact you within 3 working days of receiving the referral to tell you if it will be taken further.

6. We will arrange a meeting with the applicant to find out if they would benefit from our service and if it meets their need.

7. We will tell you if the referral has been accepted within 7 working days of receiving it. If we cannot house the applicant we will let you know, in writing, the reasons for the decision. We will also give you information on how to appeal.

8. We may be able to house someone immediately if they are very vulnerable or escaping from domestic abuse. We ask that you give all the information we need over the telephone so that we can make a decision. If we do not get enough information, we may be able to house them temporarily i.e. overnight and make a decision the next day

All material and information passed to our supported accommodation projects will be protected under Impact Housing Association's Confidentiality Policy and within the terms of the Data Protection Act.