

Langley House Trust

National Referral Procedures

1. Purpose

1. Aims of Procedures.

1.1 Langley House Trust seeks to provide support, accommodation and care services for service users who have offended or at risk of offending.

1.2 The Trust aims to make decisions about who receives those services in an equitable fashion taking into account individual needs.

2. Scope of this National Referral Procedure.

2.1 Over the years a number of Trust projects have developed local referral agreements with local partner agencies. This national referral procedure is set out to complement these. This document is also intended to provide guidance to projects which do not have a formal local referral agreement in place.

2.2 These procedures take priority over existing local agreements/ protocols. It is vital for the Trust to have consistency of practice in this important area of work.

3. Selection Criteria.

3.1 The Trust's Lettings Policy sets out the approach to all applicants for accommodation (and should be referred to for decisions with regards to accommodation based services). A copy is available upon request from any Trust project or the Central Referrals Office.

3.3 Applicants/referrals to the Trust should be:

- a) aged 18 years and over;
- b) have an offending history or be at risk of offending;

3.4 Some of our Projects have eligibility exclusions. This procedure does not over-ride these.

3.5 **Priority in allocating places will always be to those applicants/referrals that have a local connection.** However at times when vacancies exist that cannot be filled with local referrals, those outside the local boundaries will be given consideration if they fit the criteria for those vacancies.

3.6 Probation Circular 52/2004- Case Transfer Instructions gives guidance to the movement of offenders from one part of the country to another. It makes it clear for the need for a seamless transition of supervision in order to best protect the public and accommodation provision is key to effective supervision.

4. Selection Procedure.

4.1 To initiate a referral a completed and signed LHT Application Form must be submitted either directly to a local project or to the Central Referrals Office (P.O.Box 389, Barnsley, South Yorkshire, S70 2WY). Copies of the form can be secured either at a local project or at the Central Referrals Office. Application forms can be downloaded from the Trust's website at www.langleyhousetrust.org or can be e mailed from our Central Referrals Office by contacting us on info@langleyhousetrust.org

4.2. For people referring with literacy difficulties, advice is available from projects and the Central Referrals Office as to how best to take their referral forward. This may include signposting the applicant to local supporting agencies that may be able to help and these will vary across localities..

4.3 Once a completed application form is received, the Trust will then begin to process the application. In order to complete this process the Trust requires:

ii) an up-to-date list of previous convictions

iii) a full OASys risk assessment.

iv) the most recent Pre- Sentence Report

It is acknowledged that this will not be available if a not guilty plea was given when the offender was sentenced for their index offence.

4.4 This information may not exist for some applicants. This does not mean that applicants cannot be admitted to Trust projects. It does mean that in those instances approval for offering a bed space at any project must be obtained from the Central Referrals Office. Central Referrals staff will advise on how best to obtain alternative information which will inform the decision making process.

4.5 In order to make a full assessment of needs and risk the above documentation noted in 4.3, is seen as a minimum requirement.

4.6 The following documentation is also required for offenders requiring more intensive supervision and support.

i) Relevant prison reports that can comment on prison discipline during sentence and sentence planning arrangements e.g. Parole Report

ii) Medical reports that will inform any need for additional services e.g., psychiatric or psychological reports. This section also includes any data available to help us to manage substance misuse.

iii) Reports which clarify any involvement in any Accredited Programmes which aim to tackle many areas of offending behaviour.

- iv) Last two sets of Multi Agency Public Protection meeting minutes- if they exist
- v) Where service users are subject to CPA (Care Programme Approach), the Single Care Plan and copies of any recent CPA reports should be made available.

4.7 In addition to the documentation requirements mentioned above, referrals on Life Licence need to meet the following criteria:

- Completed any therapeutic work which has been identified in order to manage offending behaviour- BEFORE any release on temporary licences (ROTLs) is considered.
- A local multi agency meeting of police, probation and an LHT representative needs to take place in the area where the LHT project is based BEFORE any ROTLs take place.
- ROTLs need to take place for all referrals on Life Licence.

4.8 It essential that the Trust has the all of the referral documentation requested in order to:

- Ensure sound and defensible decision making
- Ensure effective risk assessment and risk management
- Protect of the public
- Meet the needs of the individual service user by providing targeted support/care
- Complement and collaborate with other key agencies.

5. Assessment of suitability:

5.1 All referrals are assessed in relation to the applicant's support needs and the risks that they may pose. At accommodation based services, an assessment is made of the current overall combined needs/risk currently being managed at each project. It is important to assess how the new applicant would impact on the existing service user group at the project that is considering the referral.

5.2 In order to have an accurate assessment of risk the Trust usually undertakes a face to face interview with the applicant to ascertain a full understanding of their needs, aspirations and the risk they pose. If face to face interviews cannot take place video link interviews or telephone interviews can be used. There is a standard proforma which will be completed to summarise the issues identified for all interview assessments. In addition the information from the assessment and the documentation received will enable a full needs assessment to be completed which forms the first part of the support/care plan. It will also inform the Trust's risk assessment and risk management plan.

6: Local Liaison with Relevant Partner Agencies:

6.1 Project/Service Managers must inform their local police, probation and housing dept colleagues of existing service users, all vacancies and all referrals so that all key agencies are kept fully informed.

6.2 This information giving process is managed through the fortnightly report which is circulated to these agencies and can be circulated to other agencies if they are directly involved in the project's referral process.

6.3 This information is particularly important to agencies when considering applicants who are subject to MAPPA and who may be an out of area referral.

7. Decisions on suitability/availability of service or accommodation:

7.1 The Trust has a Central Referrals Office. Its main aim is to manage the flow of referrals to the Trust at central and project level. Many referrals are managed and allocated at project level. Many more require central referral input for a number of reasons. They may have no local connection, they may have specialist needs (mobility restrictions, arson convictions, severe and enduring mental health or personality disorders or learning disabilities). There may be victim issues in their locality. There are often many reasons why referrals need to be considered centrally before permission is sought from referrers to allocate to the most appropriate projects.

7.2 The Central Referrals Office staff aim to keep in regular contact with referrers and or applicants regarding the progress of their referral.

7.3 The referrer will be provided with a written decision on whether the Trust has accepted the applicant on to the waiting list or whether the service is unsuitable for the applicant.

7.3 Any decision not to accept the applicant will be given along with reasons as to why they have not been accepted at this time. Where possible the Trust will signpost where the applicant may secure a more suitable service for their need.

8. Data Protection:

8.1 All referral data will be held securely in locked cabinets at project and central offices. The Trust will adhere to current data protection legislation and good practice in relation to this data. For more information on this the LHT Data Protection Policy should be referred to.

9. Appeals/Complaints process:

9.1 If an applicant or referrer is unhappy with the process of dealing with the referral or the outcome of a referral decision, they should inform the Director of Offender Management. This will then be dealt with as part of the Trust's complaints policy.

9.2 If the complaint is about the decision not to offer a service or a place in the accommodation then this should be made directly to the Corporate Operations Director who will ensure the decision is reviewed by a suitable manager within the Trust who was not involved in the original decision. A letter will then be sent to the applicant and referrer outlining the decision of the appeal process and if upheld the person will be placed on the waiting list and offered the project requested. This process will be completed within 14 working days of receipt of the written complaint. Emails for this should be sent to appealreferrals@langleyhousetrust.org or in writing to Essex Office, PO Box 6522, Maldon, Essex, CM9 5YF.

10. Equality and Diversity:

10.1 The Trust will aim to treat every referral with equity however diversity issues will be taken into account when making decisions.

10.2 From June 2010 all data collected on referrals will include a breakdown of BME status, Gender, Age and disability this will be analysed bi-annually to ensure there is no discrimination in how decisions are being made. It will also assist the Trust in being able to tailor where possible it's services to those being turned down. The Trust currently tracks status of those taking up our services and this has allowed it to target its resources on increasing the number of service users with a BME background.

10.3. The Trust will offer assistance in completing written documentation for those with literacy problems, visual impairments etc. Where funding allows the Trust will provide an interpreter where appropriate.

10.4 All assessments will take into account issues relating to disability.

10.5 As part of the assessment process all requirements related to faith issues will be identified and accommodated where possible. This may include adjustments to projects to ensure that service users can worship and live as their faith requires (for example, creating separate worship, food preparation and cooking areas and washing areas when required

10.6 The Trust is committed to providing staff with learning opportunities in order to ensure that they are able to see the importance of celebrating the diversity of people using Trust services. Staff are encouraged to understand the particular needs of minority service users and to be imaginative in changing our projects so that they are inclusive, welcoming places.

4. Service User Involvement

The Trust restates its commitment to the genuine and meaningful involvement of Service Users in the formation and review of all policies which have an impact on service delivery.

DOCUMENT CONTROL

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