

#### INTAKE AND REFERRAL

Policy Code: 1110 INTAKE AND REFERRAL
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### **Policy Statement**

CASS is committed to providing accessible, responsive, and equitable intake and referral processes for all NDIS participants, their families, carers, and referrers. Our process ensures that individuals are welcomed, their needs are understood, and they are accurately matched with appropriate services, whether provided by our organisation or referred to external supports, in alignment with their NDIS plan goals and personal preferences. We prioritise participant choice, control, and privacy throughout this process.

The purpose of this policy is to:

- Outline a clear, consistent, and transparent process for managing all intake enquiries and referrals.
- Ensure all enquiries and referrals are handled efficiently, respectfully, and in a timely manner
- Facilitate informed decision-making for participants regarding their support options.
- Accurately assess participant needs and service suitability.
- Ensure appropriate internal allocation of resources or external referrals to meet participant requirements.
- Uphold participant rights, including choice, control, privacy, and confidentiality.
- Comply with NDIS Practice Standards, the NDIS Code of Conduct, and relevant Australian legislation (e.g., Privacy Act 1988).

#### **Scope**

This policy applies to all employees, contractors, and volunteers of CASS who are involved in receiving, processing, or managing enquiries, intake, and referrals for NDIS participants.

### **Procedures**

Eligibility criteria

To be eligible for assistance:

- People with disability
- Be assessed and approved by National Disability Insurance Agency (NDIA).

These criteria will be consistently applied to anyone wishing to access the service.

### **Principles**

This policy is guided by the following principles:

• Participant-Centred: The participant's goals, preferences, needs, and aspirations are central to the intake and referral process.

- Choice and Control: Participants have the right to choose their providers and services. Our process supports informed decision-making.
- Accessibility: Our intake process is accessible to all, including those with diverse communication needs, cultural backgrounds, and abilities.
- Transparency: Information about our services, processes, pricing, and terms will be clearly communicated.
- Timeliness: Enquiries and referrals will be responded to and processed promptly.
- Confidentiality and Privacy: All personal and sensitive information collected will be handled in strict confidence and in accordance with privacy legislation.
- Safety and Suitability: We will ensure that our services are suitable for the participant's needs and that our staff can safely and competently deliver them.
- Collaboration: We will work collaboratively with participants, their families, carers, nominees, support coordinators, and other relevant stakeholders.
- Dignity of Risk: We will discuss potential risks associated with service options and support participants in making informed choices while respecting their right to dignity of risk.

### **Definitions**

- Enquiry: An initial contact from a participant, family member, carer, support coordinator, or other referrer seeking general information about [Your Organisation Name]'s services.
- Referral: A formal request for services for a specific NDIS participant, typically accompanied by relevant documentation (e.g., NDIS plan, reports).
- Intake: The process of gathering essential information from a participant or referrer to assess suitability for services, understand their needs, and formally onboard them as a client.
- NDIS Plan: The individualised plan developed by the NDIA outlining a participant's goals and funded supports.
- Support Coordinator: An NDIS-funded role that helps participants implement their plan, connect with providers, and build capacity.
- Service Agreement: A formal agreement between [Your Organisation Name] and the participant (or their nominee) outlining the agreed-upon services, costs, terms, and conditions.

## **Intake and Referral Process**

The intake and referral process at CASS consists of the following key stages:

## 1. Initial Enquiry/Contact

- Receipt of Enquiry: Enquiries can be received via phone, email, website form, in-person visit, or referral from another organisation/individual.
- <u>Information Gathering (Preliminary)</u>: The staff member receiving the enquiry will gather basic information:
  - o Name and contact details of the enquirer/participant.
  - o Brief overview of the participant's disability and NDIS plan status (e.g., funded, self-managed, plan-managed, agency-managed).
  - o Type of support or service being sought.
  - o Preferred method of communication.

- <u>Provide General Information:</u> Provide the enquirer with general information about CASS services, including:
  - o Overview of services offered relevant to the enquiry.
  - o Service location/delivery methods.
  - o Overview of pricing (refer to NDIS Price Guide if applicable).
  - o Our commitment to quality and safeguarding.
  - o Information about our intake process and next steps.
- <u>Detailed Intake:</u> If the enquiry indicates a potential match for our services, or a formal referral is made, the information will be escalated to the designated Intake Coordinator/Team.

### 2. Formal Referral and Information Collection

- <u>Referral Form:</u> Where possible, referrers will be requested to complete CASS formal Referral Form, which captures essential information.
- Required Documentation: Request relevant documentation (with consent) to support the intake process, which may include:
  - o Current NDIS Plan (or relevant sections).
  - o Previous reports (e.g., allied health, medical, psychological, functional assessments).
  - o Behaviour Support Plans (if applicable).
  - o Consent forms for information sharing.
- <u>Contact Participant/Nominee/Support Coordinator:</u> The Intake Coordinator will make contact with the participant, their nominee, or support coordinator within [e.g., 2 business days] of receiving the formal referral to:
  - o Acknowledge receipt of the referral.
  - o Discuss the participant's needs, goals, and preferences in more detail.
  - o Confirm current NDIS funding and plan management arrangements.
  - Explain [Your Organisation Name]'s services and how they align with the participant's plan.
  - o Discuss pricing and potential out-of-pocket expenses (if any).
  - o Outline the next steps in the intake process.
  - o Address any initial questions or concerns.

# 3. Needs Assessment and Service Suitability

- <u>Comprehensive Needs Assessment:</u> Conduct a comprehensive needs assessment, which may involve:
  - o Further discussions with the participant, their family/carers, and support coordinator.
  - o Reviewing provided documentation.
  - Where appropriate and with consent, contacting other professionals involved in the participant's care.
  - Considering specific risks, including health, safety, behaviour, and safeguarding concerns.

### • Service Matching and Suitability:

o Determine if CASS has the capacity, expertise, and resources to meet the participant's needs and goals.

- Assess the suitability of our services based on the participant's NDIS plan, funding, and preferences.
- o Identify any gaps in our service offerings relative to the participant's needs.
- <u>Discussion of Dignity of Risk:</u> Where relevant, engage in open discussions with the participant about any identified risks associated with their choices or desired activities, exploring mitigation strategies. Document these discussions.

# 4. Service Offer and Agreement

- <u>Proposal of Services: If CASS</u> is deemed a suitable provider, a clear proposal of services will be presented to the participant, outlining:
  - o Recommended services and frequency.
  - o Proposed start date.
  - o Cost per support item and total estimated cost (aligned with NDIS Price Guide).
  - o Key staff who may be involved in delivering the supports (where possible).
- <u>Service Agreement Development:</u> A comprehensive Service Agreement will be drafted and provided to the participant (or their nominee/support coordinator) for review. This agreement will include:
  - o Clear description of supports to be provided.
  - o Roles and responsibilities of both parties.
  - o Pricing and payment terms (including cancellation policy).
  - o Period of agreement.
  - o Processes for review, modification, and termination of services.
  - o Complaints and feedback mechanisms.
  - o Privacy and confidentiality statements.
  - o Emergency contact information.
- Opportunity for Questions: Provide ample opportunity for the participant to ask questions and seek clarification before signing the Service Agreement.
- <u>Agreement Signing:</u> Once all parties are satisfied, the Service Agreement will be formally signed. For plan-managed and agency-managed participants, service bookings will be created as per NDIS requirements.

### 5. Onboarding and Commencement of Services

- <u>Internal Handover:</u> Once the Service Agreement is signed, a formal internal handover will occur to the relevant service delivery team. This includes providing all necessary participant information, support plans, risk assessments, and communication preferences.
- <u>Welcome and Introduction:</u> The participant will be officially welcomed to CASS. Initial meetings or introductions with key support staff will be arranged.
- <u>Service Commencement:</u> Supports will commence as per the agreed-upon Service Agreement and participant support plan.

## Managing Unsuitable Referrals and External Referrals

• When Services are Not Suitable: If, during the intake process, it is determined that CASS cannot safely, competently, or appropriately meet the participant's needs (e.g., lack of capacity, specific expertise not available, funding limitations, geographical constraints), this will be clearly and sensitively communicated to the participant/referrer.



- External Referral (Warm Handoff): Where possible and appropriate, CASS will assist the participant/referrer by providing information about other suitable NDIS providers or mainstream services that may be able to meet their needs. This may involve:
  - o Providing a list of other registered NDIS providers.
  - o Connecting them with Local Area Coordinators (LACs) or Early Childhood Partners (ECPs).
  - o Sharing relevant community resources.
  - o With consent, making a warm handoff or direct referral to another organisation.
- <u>Documentation of Referral Outcomes:</u> All outcomes of unsuitable referrals, including reasons and external referral information provided, will be accurately documented.

Reviewing and approving this policy			
Frequency	Person responsible	Approval	
3 years	Unit Head	HAS & DS Committee	

Policy review and version tracking				
Review	Date Approved	Approved by	Next Review due	
Version 1	1 June 2014	HAS & DS Committee	31 May 2017	
Version 2	29 May 2017	HAS & DS Committee	28 May 2020	
Version 3	November 2020	HAS & DS Committee	November 2023	
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