DUTY TO REFER PUBLIC BODIES REFERRAL FORM



Please complete all relevant sections on this form. We need open and honest information so that we can provide the best help and support. Please send referrals to Dutytorefer@royalgreenwich.gov.uk for any further information please call 0208 921 2863

I. Has the servi	Has the service user given consent to this referral? YES NO													
2. Preferred Local Authority?														
3. Referring Agency Details:														
Service Name:		O Prisons					Social service authority							
Please tick the area	1	 Youth offending institution 					○ Jobcentre Plus							
that apply to you		○ Secure tra	○ Secure training centre					○ Urgent treatment centre						
		○ Secure co	llege				Emergency department							
		O Youth offe	ending t	Ů,			tal in t	their function of providing						
			•	inpatient care				care)					
		Probation	service	e (including			○ The Secretary of State for Defence							
		community	rehabili	itation companies)			(The Ro	yal Nav	vy, the	Royal A	Marines, the r	egular		
							army and	the Ro	oyal Air	r Force.)				
Worker Name:														
Worker Contac	:t	E Email Ac	ldress:											
detail:														
		T elephon	e Numl	bers:										
4. Service User	Det	ails:												
First Name:					Las	st N	ame:							
Gender								1						
○ Male														
	1													
Date of birth:			Age:			Na	tional In	suran	ce Nu	ımber	:			
Prognant:	ΟY	ON	Evpos	ted Due Da	to:									
-6			•	ted Due Da	te.									
Contact detail:		≣ Email Ac												
		Current a	address											
		5 6 1												
		Post Code:		1										
Next of Kin:		Telephon	e Numi	bers:										
Name:				Address:						Talanha	ne numbers	•		
				Addi ess.					- '	cicpiic	nie numbers	•		
Relationship:														
Best way to ma														
○ Telephone call	0	Text	O Emai	I O Su	ppoi	rt W	orker	○ No I	Prefer	ence	O Next of	kin		
Address: Please tick which best describes status at last settled/permanent address:														
Main or last permanent home if different			erent	<u> </u>					o Loo	Looked after child placement				
from above?				Shared	•	•	•	•		=	ed or support			
				D · .			۲			using or		8		
						_	daines (====	طعنيير		•				
Date moved in?							lgings (not	with	Tied to Employment					
				family o		,			 HM Forces Accommodation 					
				Council tenant					Livi	Living with Family / Friends				
				 Housing Association Tenant 					 No fixed abode 					
									o Oth	her.				

5. Previously approached The Hou	using Inclusion Service?	YES	NO	
If YES , please provide details				
6. Which of the following best des				
Mortgage Repossession/Arrears	Non-racially motivated /			
5.1.6.1.1.1.	other motivated violence or hara			
End of private rented tenancy –	Left prison or are on remand with	th no		
assured shorthold tenancy End of private rented tenancy –	accommodation available Left HM Forces			
not assured shorthold tenancy	Leit Hiri Torces			
(resident Landlord)				
(resident Landierd)				
Caravan / houseboat	Student accommodation			
End of council or housing	Required to leave accommodation	n provid	ed	
association tenancy	by Home Office as Asylum suppo	ort		
Rent arrears in Private, Council or	Leaving or have left hospital			
housing association home				
Eviction from supported housing	Loss of tied accommodation			
Family as friend and large 199	Classinguish			
Family or friend no longer willing or able to accommodate	Sleeping rough			
Leaving or have left local authority	You are sofa surfing			
care (looked after child)				
care (looked area child)	Property disrepair			
Relationship with partner ended	Other (Please specify):			
(non-violent breakdown)	(
Experiencing domestic abuse				
Racially motivated violence or				
harassment				

7. Please provide homelessness.	details of	f the c	ircum	stan	ces which led t	o homelessness or risk of			
8. Date became he	omolossi								
Household details									
Include anyone who m		of the l	househ	old?					
Please give details belo	ow:								
Family Name	Date of Birth	Age	Sex M/F	Sex National Insurance N		Relationship to service user			
	Dir cir		1 1/1	M/F Ethnicity					
9. Support Needs	(Please tick	c as ma	iny that	: apply	to service user)				
No support needs					At risk of/has e	experienced abuse (non-			
Young person aged	16-17 yea	rs			domestic abuse	e)			
Young person aged	18-25 year	S			Drug depender	ncy needs			
requiring support to	-				0 1	,			
independently									
Young parent requir manage independent		t to			Alcohol dependency needs				
Care leaver aged 18-					Offending History				
Care leaver aged 21					History of repeat homelessness				
Physical ill health and disability					History of rough sleeping				
History of mental he	alth probl	ems			Former asylum seeker				
Learning disability					Old age	d age			
At risk of/has experi	enced sex	ual			Served in HM	Forces			
abuse/exploitation									
At risk of/has experi	enced				Access to education, employment or				
domestic abuse					training				
Other please specify	:								

10. Communication:									
Language interpreter or a signer needed? Yes No O									
If yes, what language?									
Information in any other format, like Braille or large print?									
Please say which format:									
Help with reading, writing or completing forms required?									
II. Status:									
Is the service user or members of the household British or Commonwealth citizens? Yes \circ No \circ									
Please tick the description that best describes the service user (S-U) / partner's nationality:									
•	S-U	Partner		S-Ù	Partner	,	S-U	Partner	
UK NATIONAL			HUNGARIAN			SLOVENIAN			
UK NATIONAL (returning			IRISH			OTHER EEA			
from abroad or in UK for Ist			LATVIAN			NATIONAL			
time)	ļ						ļ		
BULGARIAN			LITHUANIAN			NON EEA			
CZECH REPUBLIC			ROMANIAN			NATIONAL			
CROATION			POLISH			Not Known			
ESTONIAN			SLOVAKIAN						
Other: (please describe)									
Eligibility									
Has the service user or an	yone o	n the refer	ral ever lived ou	tside th	ne UK?	○ Yes	O No		
When did they / househole	d meml	ber arrive i	in the UK?						
•									
Are they / the partner/ oth	ner hou	sehold me	mbers subject to	immig	ration cor	ntrol OYes	ONo		
Are they / the partner/ other household members subject to immigration control OYes ONo Please give details below:									
5									

12. Work, education, and Are they / partner / other Yes O No O		•	currently in empl	oyment or e	ducation?
If YES, they will be asked to	provide	information to	support this.		
Please tick all that apply:		Service use			usehold member give name(s)
Don't Know/Refused					
Working: 30 hours a week or	more				
Working: less than 30 hours a	ı week				
Training Scheme/Apprentices	•				
Not working because of long	term				
sickness or disability					
Registered unemployed					
Not registered unemployed b seeking work	ut				
At home/not seeking work (in	ncluding				
looking after the home or fam	_				
Retired (including retired earl					
Full-time student	• /				
Other					
13. Financial information:			_		
Please provide details of i	ncome	and/or Welfa	are Benefit you red	eived below:	
Household Ir	ncome			Benefits	
Please advise if weekly (per week) or monthly (per month)	Amou	ınt received		Amount received	
Wages			Attendance Allowa		
Partner's wages			Bereavement Benef	fit	
State pension			Carers Allowance		
Private pension			Child Benefit		
Student Ioan			Child Disability Livi	ing Allowance	
Student grant			Disability Living All	owance (PIP)	
Maintenance			Employment Suppo	ort Allowance	
Money from anyone who			Employment Suppo		
they live with			with ESA Support (Component	
Insurance payments			Income Support		
Rent from lodgers			Industrial Injuries B	enefit	
Jobseeker's Allowance			No Benefits Claim	made	
Housing Benefit			Working Tax Cred	lit	

Child Tax Credit

War Widow/er Pension

Benefits refused or sanctions, please give details:

Pension Credit

Universal Credit

14. DATA PROTECTION STATEMENT	YES	ОИ	
Has the below been read and understood? (Please read and explain to service			
user)			

Personal Information

The information which has been supplied to the housing inclusion team will be used to make contact with the service user to verify the type of housing support required. The information is gathered in accordance with housing legislation.

The categories of the information that we collect, process, hold and share include:

- personal information (such as name and address)
- characteristics (such as ethnicity and health information)

The Housing Inclusion Service will contact relevant organisations /third parties for information, for the purpose of assessing the service user and support needs. Personal data may be shared with:

- Revenue & Benefits Department, Children's Services, including the housing procurement team (HACTRAC), other directorates within this Council and other Local Authorities.
- Department of Work & Pensions and other third party agencies and organisations.
 This may include referrals to organisations who offer support, such as housing providers (including private landlords), health organisations, money/debt advice agencies, employment and training services etc.

The lawful basis on which we use this information

Currently the The Housing Inclusion Service will collect and use this information under the Data Protection Act 1977. As from 25 May 2018 they will collect and use this information under public task - GDPR Article 6(1)(e): permits processing where necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller and Article 9(2)(b) – for social protection purposes - 2018.

Requesting access to personal data

Under data protection legislation, service users have the right to request access to information that we hold, and also have the right to:

- object to processing of personal data that is likely to cause, or is causing, damage or distress
- prevent processing for the purpose of direct marketing
- in certain circumstances, have inaccurate personal data rectified, blocked, erased or destroyed; and
- claim compensation for damages caused by a breach of the Data Protection regulations

If there is concern about the way we are collecting or using personal data, we request that this is raised with us in the first instance. Alternatively, contact the Information Commissioner's Office at https://ico.org.uk/concerns/

Access and Storage

Personal information will be held by the Housing Inclusion Service for a period of 6 years.