

## How to make a referral

At Regard we understand that finding a service can be a difficult process for individuals, families and care managers. Therefore we have broken down a simple and easy to follow 4 step referral process in this flyer for you.



### Find a service

1. On our website [www.regard.co.uk](http://www.regard.co.uk) we have a search engine which can help you find the answers. You can search by geographical area; by specialism such as autism; search for residential or supported living; or simply to get ideas on what can be achieved.

ONLINE REFERRAL



### Contact us to make a referral

2. Once you have found a service making a referral is easy. There is a button to access a referral form on each service page or you can contact the customer relationship manager for that service who will take you through the whole process. We also have a dedicated referrals telephone number which is an 0800 number so even the call is free! **0800 840 0313**.

Alternatively you can fill out the form on the back of this flyer and hand it back or email it to [referrals@regard.co.uk](mailto:referrals@regard.co.uk)

### Creating a personalised care plan



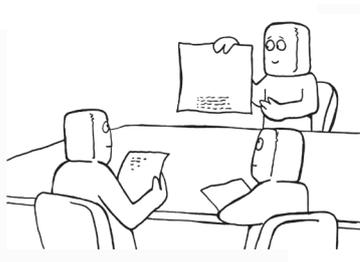
3. We will then discuss the possible options with you which may either be by telephone, face to face or whilst you visit a service.

A detailed assessment will then be completed forming the basis for a **personalised care plan** with a detailed outcome plan and learning logs to show progress.

### Agreeing costs and moving in!

4. We will then provide detailed costings based on a clear and detailed assessment in whichever format is required. The care manager will then take these to a 'panel' to request agreement for funding.

If approved we then arrange a move in date!



# REFERRAL FORM

Please answer all the questions so that the most appropriate person can call you back.

YOUR DETAILS	
Full Name:	Local authority (if applicable):
Telephone No (direct line): Mobile: Fax No:	Where/how did you hear about Regard?
Email Address:	
SERVICE USER DETAILS;	
Male/female: _____	Name or initials: _____
Age: _____	
Type of placement? i.e. Residential living, supported living, respite	
Location of placement considered?	
Any overview of needs?: i.e. Autism / challenging behaviors / mobility issues / communications issues:	
Is there any information available such as a pen picture or care plan overview? Yes/No	
Can this be emailed or faxed over? Yes/No	
Have you looked at our website? Yes/No	
For Office Use only	
Date referral received:	Action taken i.e. who was this referral passed on to?
Was the referral successful?	



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[www.regard.co.uk](http://www.regard.co.uk)