

Referral for Sheffield Homeless Prevention and Resettlement Service - Confidential

The Service is city-wide, for single people, families and also households affected by domestic abuse. Please call if you would like more information: 0344 515 1990/1.

Consent

By submitting this referral you confirm you have gained appropriate consent from the client to do so including their agreement to have their basic personal information stored on **Sheffield City Council's Housing Support Pathway**. For a full description of what this is, please see page 4.

You also confirm that the client consents to the exchange of information between agencies who are providing support to them. Please obtain signed confirmation from the client of this below.

Signed by person being referred: _____

Part One - Referral Information

Referral agency: _____ Date of referral: _____
 Name of referrer: _____ Telephone: _____
 Email: _____ Fax: _____

Is the referral urgent? Yes ☐ No ☐

If yes, please state reasons: _____

Is the client being referred for Domestic Abuse related housing support? Yes ☐ No ☐

Details of client being referred:

Title: _____ Name: _____

Address: _____ Postcode: _____

Telephone Number: _____ D.O.B: ____/____/____ Gender: _____

Ethnicity: _____ Main Language: _____ Interpreter needed? Yes ☐ No ☐

Does the client have a disability? Yes ☐ No ☐

Please give details: _____

Information/communication needs: _____

Is the client pregnant? Yes ☐ No ☐ If yes, date due: ____/____/____

Household details: Include people who will live in the household.

Do not include those who the client may be temporarily lodging with.

Name	Relationship to person referred	Gender	Age/DOB	Disability

Part Two - Housing Support

Accommodation Type:

Owner occupier	
Temporary Homeless Accommodation	
Supported Housing	
Local Authority	
Housing Association (if yes, please state which HA)	
Private Rented	
Friend/Relative	
Hospital	
B&B	
Other – please specify	

Please give details of the primary need for housing related support (e.g. household resettling to a new property, rent arrears, disrepair etc.)

Is any court action pending (including Notice Seeking Possession)? Yes ☐ No ☐

Please provide details/dates:

Does the client have any legal representation? Yes ☐ No ☐

Details:

Please give further details of any particular needs or issues: (e.g. Domestic and/or sexual abuse; child/adult safeguarding; drug/alcohol use; physical/mental health issues; previously in the armed forces; care leaver; history of offending/violence; asylum seeker/refugee; communication needs or anything about the referral that is relevant to putting a support package together)

Are there any needs/issues affecting any children in the household? Yes ☐ No ☐

If yes, please provide details:

Are there any Domestic or Sexual Violence issues? Yes ☐ No ☐

If yes, please give details:

If the referral is for resettlement support:

Has the council completed the investigation into homeless status? (If applicable)	
Has the council agreed to re-house? (If applicable)	
Has an offer of accommodation been made?	

If an offer of accommodation has been made, please supply the following information:

New address	
Tenure	
Date Signed For/Due to Sign	

Part Three – Additional Information

Are there any other agencies involved? Yes ☐ No ☐

Agency	Worker	Contact Information

Is there any known risk of violence to support providers/others? Yes ☐ No ☐

If yes, please give details:

Have they currently got or, if moving, will they have support from anyone else e.g. family or friends? Yes ☐ No ☐

If yes, please give details:

Sheffield City Council Housing Support Pathway

In order to assist with appropriate placement into both accommodation and floating support services, Sheffield City Council have introduced a system call the Housing Support Pathway (HSP).

This system holds basic personal information about all clients who are receiving housing support by a contract that is funded by Sheffield City Council. Clients can opt to have any sensitive data (such as ethnicity, disability status, sexual orientation etc.) set to “prefer not to say” and any conversations relating to this will take place following initial assessment and sign up to the service.

The main aims of this system are to ensure clients are being referred to the most appropriate support for their needs and to monitor that service providers (e.g. Shelter) are meeting all their contractual obligations.

Shelter do not store any case information on this system other than the goals a client identifies during their needs assessment and their progress towards meeting these goals. This is only done with the explicit agreement of the client and no information will be stored on the HSP (other than basic personal details*) without the clients express, signed permission.

* “Personal Details” refers to the following information;

Name
Address
Sex
Date of Birth
Housing Status
Household Type
Ethnicity (can be set to prefer not to say)