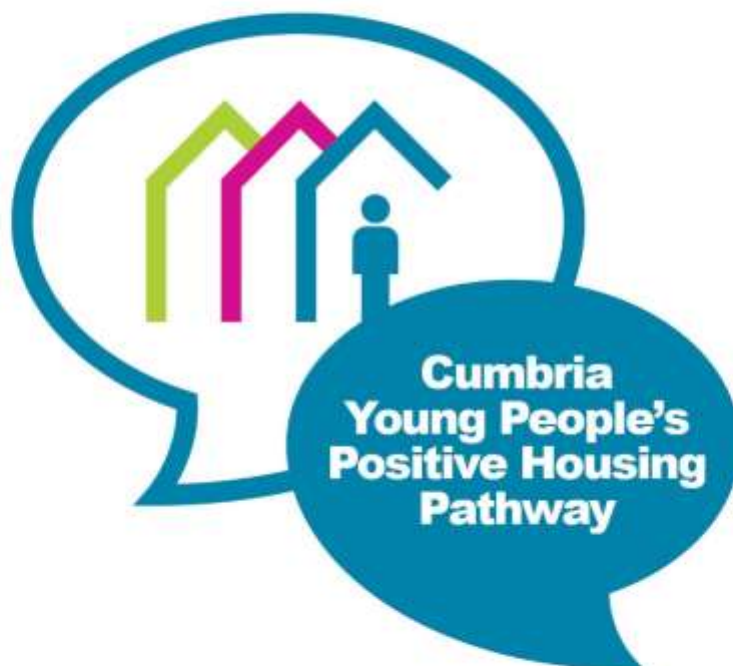


**First Contact Script for 16/17  
Year Olds Who are  
Homeless or at Imminent  
Risk of Homelessness**



The Script is the initial response when a young person (aged 16-17 years) presents as homeless/planned move to live independently. Information contained on this form may be shared with a range of agencies, including Children's Services, supported accommodation providers, Nightstop and district housing teams. All referrals will be discussed at the Gateway Group. The Gateway Group is the single point of access for the County, for referrals into the Young People's Positive Housing Pathway (PHP). It will discuss and allocate referrals into the Pathway; these referrals will be for emergency accommodation, short-term accommodation, homeless prevention and/ or flexible support.

**THIS FORM NEEDS TO BE FULLY COMPLETED BY THE REFERRING AGENCY, WITH AS MUCH DETAIL AS POSSIBLE, IN CONJUNCTION WITH THE YOUNG PERSON  
ANY INCOMPLETE FORMS WILL BE RETURNED TO THE REFERRER TO COMPLETE**

**IF THE YOUNG PERSON IS 16/17 AND IS HOMELESS OR AT IMMINENT RISK OF HOMELESSNESS: THE REFERRING AGENCY MUST COMPLETE AN IMMEDIATE HUB REFERRAL**

A copy of the script should be provided to the Hub. The Single Contact Form does not need to be completed in this instance as this is an urgent referral i.e. there is an immediate risk of harm to the young person. This contact can be made over the phone with the script emailed as soon as possible thereafter. These young people will be passed from the Safeguarding Hub to the district Support & Protect teams within 24 hours for assessment. Hub Telephone number: 0333 240 1727

If the young person is homeless tonight, other family & friends options should be explored or a referral made to Nightstop; this work needs to be progressed by the referring agency independent of the Hub referral.

The Duty to Refer element of the Homelessness Reduction Act came into force on 01 October 2018. This places a duty on public authorities to notify their local Housing Authority when one of its service users may be homeless or at risk of homelessness within 56 days and if they agree to the referral. The purpose of this is to prevent homelessness where possible. Authorities must ask the service user how they can be contacted by the Local Authority and this should be shared in the referral. For further information or to make a referral please go to:

[Allerdale](#)

[Barrow](#)

[Carlisle](#)

[Copeland](#)

[Eden](#)

[South Lakes](#)

Consent must be given for this. Has consent been given?  Yes  No

If you have any queries about the First Contact Script or require any assistance with completing it, please contact your local Youth Homelessness & Housing Officer:

<b>Allerdale &amp; Copeland:</b>	Helen Walker	<a href="mailto:helen.walker@cumbria.gov.uk">helen.walker@cumbria.gov.uk</a>	07825 340628
<b>Barrow &amp; South Lakes:</b>	Emmie Sutherland	<a href="mailto:emmie.sutherland@cumbria.gov.uk">emmie.sutherland@cumbria.gov.uk</a>	07825 313726
<b>Carlisle &amp; Eden:</b>	Andrew Kennedy	<a href="mailto:andrew.kennedy@cumbria.gov.uk">andrew.kennedy@cumbria.gov.uk</a>	07855 408488

**Please indicate the purpose of the referral (tick all that apply):**

- Referral to Supported Accommodation  
*Please specify which by ticking all that apply:*
  - Project John (Barrow)
  - Impact (South Lakes)
  - Impact (Penrith)
  - Impact (Carlisle)
  - Impact (Whitehaven)
- Referral to Nightstop (if this is an urgent/same day referral, please call Nightstop on 07958 447477)
- Referral to Youth Homelessness & Housing Officer
- Referral to Safeguarding Hub – **must be done if homeless or at risk of imminent homelessness**
- Referral to Housing Intervention Support Worker (flexible support)

<b>Can you give me some basic details about yourself?</b>			
Name			
DOB		Age	
Address			
Postcode			
Contact Number			
Ethnicity			

**CURRENT SITUATION**

Can you tell me a bit more about where you have been staying and what has been going on for you? \_\_\_\_\_

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Are you a care leaver? If so, what is the expected end date of your current accommodation and care? \_\_\_\_\_

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On a scale of 0-10, where...

10 = I feel safe secure and happy at home, and I can return home

0 = I don't feel safe or secure at home and I am unhappy. I am not cared for and have nowhere to stay

Where would you scale yourself today? 0 1 2 3 4 5 6 7 8 9 10

Can you tell me a bit more about what is making you feel this way? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you somewhere to stay tonight?  Yes  No

Can you go home or are there any friends or family members you could stay with?  Yes  No

Is there anyone you could stay with where you would be safe and can I help you sort that?

\_\_\_\_\_

\_\_\_\_\_

**Please advise the young person that because they are aged 16/17 years, we will need to contact their parent(s)/carer(s)/guardian(s) to verify homelessness (if safe to do so.)**

**A call MUST be made to parents BY THE PERSON COMPLETING THE SCRIPT to verify the YP cannot go home.**

Parent/Carer/Guardian Name(s): \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Response from parent/carers:

**If there are safeguarding concerns, a referral must be made to the Safeguarding Hub with a copy of this form attached.**

**If there are no safeguarding concerns, carry on to:**

*Lots of young people fall out with their parents and it can take a bit of time to sort, but it's much better to be at home/with your family until you're 18 and then plan your move if that's what you need or want to do.*

*What could we do to help you to resolve the difficulties you are having at home?*

*A Family Group Conference is a decision-making and planning process whereby you, your family and wider support circle makes plans and decisions together to help your situation and keep you safe. The plan is made entirely by this group and not by a professional person and will take place in a venue that is suitable for everyone. This process has had a 95-97% success rate in the UK.*

*Would you be interested in some family support such as mediation/Family Group Conferencing?*

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**EMERGENCY ACCOMMODATION – HOMELESS TONIGHT**

*Nightstop is a service providing free, safe and secure emergency accommodation for homeless young people across Cumbria, aged 16+. Nightstop places young people who have nowhere to stay in trained volunteers' spare rooms. Young people receive a private room, a warm meal and somewhere safe to stay for the night, whilst we assess their needs and explore a more permanent solution.*

Are you referring to Nightstop?  YES  NO

**If yes, please ask the YP to read and sign the consent statement below...**

**If this is an urgent (same day) Nightstop referral, please contact Nightstop on the number below.**

**Consent Statement if Nightstop is being considered**

*We need to collect information from you so that we can understand what support you may need. We will treat all information as confidential. We will not share it with any organisation unless required by law or you give us permission to do so, where it is relevant to your support and accommodation.*

*We will need to contact other agencies to assess your support needs and to provide suitable accommodation, so we may contact the following agencies:*

- Youth Offending Service/Probation/Police
- Housing Options Teams
- Benefits Agencies/Jobcentre
- Inspira/Education Providers
- Social Services
- Family/friends
- Any other services that you are currently/have been involved with

*We will always contact the police but if you do not want us to contact any of the other agencies you are involved with, please let us know.*

**Referred Person – Consent**

***I am happy for Depaul to keep written and electronic information about me.***

***I understand that this information may be shared in order to safeguard anyone at risk.***

***I am happy for Depaul to contact other agencies, including the police, where it is necessary for the purposes of my support.***

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**FAO CHILDREN'S SERVICES**, if this referral is for an ELIGIBLE or RELEVANT young person and Children's Services need to be informed as well as the police if the YP is missing from a placement, please record this on the referral form that Emergency Duty Team (0333 240 1727) MUST be notified alongside the police.

**Nightstop Contact Details**

Sharon Jackson, Senior Nightstop Co-ordinator

07958 447477

[Sharon.jackson@depaulcharity.org.uk](mailto:Sharon.jackson@depaulcharity.org.uk)

**SUPPORT NEEDS AND RISK**

The next thing we need to establish is whether you are getting any help from anyone right now. This will help us work out if you need any extra support and who best can do that.

Are you getting support from any agencies? Please give details.

Name	Agency	Contact Details	What is their involvement in your support?	Will they continue your support if you move on to independence?

Do you have any friends or family that provide you with support? If so, please give details?

Do you attend school/college?  Yes  No Details: \_\_\_\_\_

Are you in paid employment?  Yes  No Details: \_\_\_\_\_

How much do you earn for work?  Weekly  Monthly Details: \_\_\_\_\_

Are you in receipt of benefit?  Yes  No Details: \_\_\_\_\_

Do you do voluntary work?  Yes  No Details: \_\_\_\_\_

Do you have a bank account?  Yes  No

Do you have proof of a NI Number?  Yes  No

Please let us know what you need support with by completing the table below:

	yes	no	sometimes
I can manage my budget			
I understand the benefit system and how to ensure I claim my full entitlement			
I know where to go to get financial help and support			
I find it easy to meet new people and make new friends			
I have hobbies and interests			
I know what my housing options are			
I have a healthy lifestyle			
I can cook meals on a budget			
I have issues with drugs and/or alcohol			
I know where to go if I am concerned about my health/wellbeing			





**HOUSING OPTIONS**

If you are 16 or 17 years of age, with nowhere to stay, there are certain processes we need to follow to make sure you are getting the right support; this could include talking to your family and friends before making any big decisions about where you are going to live. We are interested in hearing about your story and understanding whether you need additional support outside of your family and friends. In order to do this, we will need to complete some assessments to get to know you better. One of these assessments may be completed by a social worker, throughout this process you can be supported by a Youth Homeless and Housing Officer.

Give young person the leaflet '[Housing Support for 16 and 17 Year Olds who are Homeless or at Risk of Homelessness](#)'. 'Housing Support for 16 and 17 Year Olds who are Homeless or at Risk of Homelessness'. This can be found in the Professionals section of the Youth Homelessness website. If the young person has any further questions, let them know that a Youth Homelessness & Housing Officer will be in touch to discuss their referral.

Is there someone you would like to be invited to meetings alongside you to help you put your case across and make sure that your voice is heard? We call this person an advocate. If you don't have someone but would like an advocate, we may be able to refer you to NYAS. NYAS stands for the National Youth Advocacy Service. You may be able to get help from an advocate if you feel you are not being listened to about any issue, such as a Children's Services/Early Help meeting, a Family Group Conference or if you wish to make a complaint. An advocate may be able to act as a voice for you. If you are interested, I could ask if you meet the criteria and refer. Is this something you would be interested in?  YES  NO

Referral to NYAS completed?  YES  NO Date: \_\_\_\_\_  
 NYAS website: [www.nyas.net/](http://www.nyas.net/)

**ACTION & NEXT STEPS**

What I would like to do now is talk you through what happens next, where this information goes and what happens to it but before I do that, I would like to hear about what you would like to see happen and where you would like to be living.

We are looking for the young person to expand beyond "I need somewhere to live" so that we understand their desired outcome; is it about a tenancy and support to manage, is it about support to return home, is it about living in supported accommodation etc...? Use the Housing Pathway for your district to talk the young person through the options, being realistic about their level of choice. Look at the relevant Housing Pathway in your Local Commitment at <http://www.cumbria.gov.uk/yphousing/professionals/protocol.asp>

So, I said at the beginning that I was going to take some notes and fill in a form; I'd like us to go through briefly what I have written on the form to make sure that you agree this is a fair record of what we have discussed. With your permission, I will now share this information with Children's Services so that they can do a first assessment of what your needs are and we can start to work out how best to help you.

Are you happy for me to share this information? If your case is given to someone in the local Support & Protection Team, then they will be in touch with you as soon as possible, within a maximum of 24 hours. If your case is not passed to the local team, we will look at other ways to support you.

**Consent to share information before the referral can be processed:**

I give permission for Cumbria County Council to share the information contained in this document and that any relevant agencies that are involved in my care and support can be contacted.

I understand that if the information on this form is untrue and incorrect and that any false or misleading information may lead to:

- My referral being cancelled; and/or
- An offer of support/accommodation being withdrawn.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If Script completed on telephone please tick to confirm you have gained verbal consent

**NB Children's Services Support & Protection Teams are closed at the weekend so if the YP presents late on Friday, the response times will start from Monday morning. So if the form is passed to Safeguarding Hub late on Friday, they will undertake their assessment and if it is passed to the local team, they will be in touch the following Monday. In the meantime, contact the Emergency Duty Team Social Worker to jointly identify suitable options.**

**IF OUT OF HOURS:**

*I will now contact the Emergency Team Social Worker and between us we will agree a solution for your immediate accommodation needs. On Monday, your details will be passed to Safeguarding Hub for them to look at your circumstances in more detail.*

**IS THIS PROGRESSING TO A SAFEGUARDING HUB REFERRAL?**

**YES**

**NO**

If yes:

*I will copy the form so that I have a copy and you have a copy as well as the one I will send to Children's Services.*

*I will now contact Children's Services, to discuss with them how best to proceed and how to support you. They will carry out an assessment of your needs. If you are homeless and have nowhere suitable to stay; we will work together to find suitable, temporary accommodation for you whilst this assessment is undertaken and we continue the conversation about your longer term needs.*

Name of Referrer: \_\_\_\_\_

Date: \_\_\_\_\_

Organisation: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Email: \_\_\_\_\_

**What to do with the First Contact Script now...**

**This completed First Contact Script now needs to be emailed to the Youth Homelessness & Housing Service for review and mapping prior to being referred into the Gateway Group. Please note, any incomplete forms will be returned to the referrer for completion so please ensure you have completed it in its entirety to allow for a quicker response for each young person.**

Email address: [cshomelessteam@cumbria.gov.uk](mailto:cshomelessteam@cumbria.gov.uk)