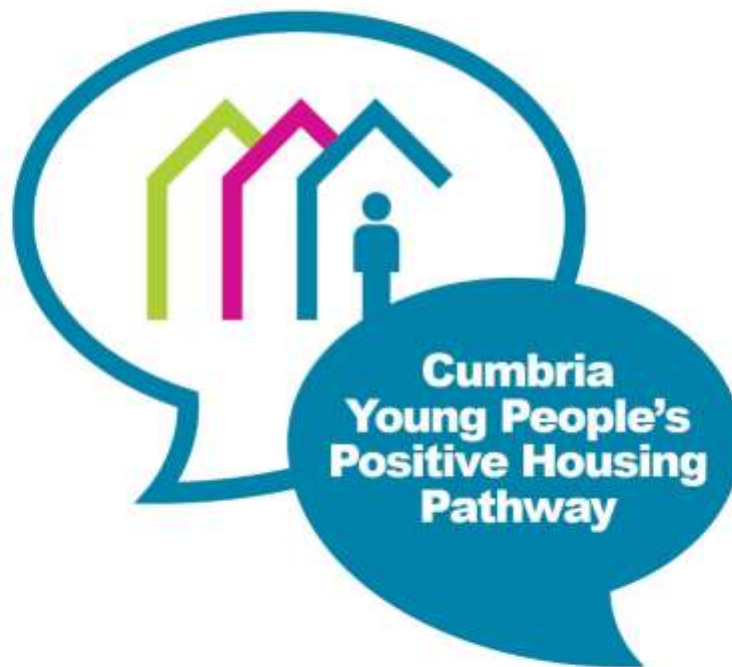


**First Contact Script for 18-24
year olds, who are homeless
or at immediate risk of
homelessness**



THIS FORM NEEDS TO BE FULLY COMPLETED BY THE REFERRING AGENCY, WITH AS MUCH DETAIL AS POSSIBLE, IN CONJUNCTION WITH THE YOUNG PERSON

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:

Allerdale & Copeland:	Helen Walker	helen.walker@cumbria.gov.uk	07825 340628
Barrow & South Lakes:	Emmie Sutherland	emmie.sutherland@cumbria.gov.uk	07825 313726
Carlisle & Eden:	Andrew Kennedy	andrew.kennedy@cumbria.gov.uk	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 Housing Intervention Support Worker (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

<i>Can you give me some basic details about yourself?</i>			
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? _____

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?

Would you be interested in some family support such as mediation?

YOUR CURRENT ACCOMMODATION INFORMATION SUMMARY

Do you have a tenancy with a registered landlord? Yes No

Do you have a tenancy with a private landlord? Yes No

Are you living in supported accommodation? Yes No

Are you living in temporary accommodation? Yes No

Are you in a Homestays placement? Yes No

Are you a care leaver? Yes No

If you are a care leaver, what is the expected end date of your current accommodation and care? _____

Do you live with family/friends on a permanent basis? Yes No

Do you live with family/friends on a temporary basis? Yes No

If this is temporary, what is the address and when do you expect to leave?

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: _____

Nightstop Contact Details

Sharon Jackson, Senior Nightstop Co-ordinator

07958 447477

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 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			

Do you have any criminal convictions or any offences waiting to be dealt with? _____

EMOTIONAL HEALTH & WELLBEING

How are you feeling in yourself on a scale of 0-10?

Where 10 = you are happy, you feel supported by family/friends/professionals and they are helping you to achieve your goals;

and 0 = you feel that you can't see a future for yourself, nothing is going well, you don't feel supported by anyone and you think about hurting yourself or ending your life.

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 makes you feel this way? _____

Is there anything that makes it better?

HOUSING OPTIONS

Your local Youth Homelessness & Housing Officer will be in touch shortly to discuss further options.

You can view what the housing options are in your area in a [Housing Pathway](#) format in the [Youth Homeless & Housing](#) website.

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 within your [Local Commitment](#).

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?

Yes

No

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.

IF CONSENT IS NOT GIVEN, THIS REFERRAL CANNOT PROGRESS ANY FURTHER

Name: _____ Signature: _____ Date: _____

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

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