

Network Referral Policy Examples

From Best Practices Manual for Member Organizations:

How to Conduct a VLNDC Intake and Make a Referral

VLNDC provides its members with the flexibility to determine the best way to screen intakes for a referral to the network. In order for the referrals to be processed, the network does require certain intake information to be shared with the Navigator, as outlined on the VLNDC intake form, but does not require a set process on how to obtain the information.

For example, a member may choose to designate one intake specialist as their “VLNDC intake specialist” and bring them into client conversations if the network may be an appropriate resource to offer the client. Others may choose to train all of their intake staff on how to do identify a VLNDC appropriate referral. Finally, an organization may also choose to only refer to the VLNDC when, during existing representation of a client, an issue arises that the client could benefit from a referral.

On the VLNDC member portal, facilitators can access the “Add Case” form to enter the VLNDC intake information required for a referral.

Below, are some suggested steps to utilize when gathering VLNDC intake information from a client.

1. Assess client’s baseline knowledge.
 1. Are they familiar with the services VLNDC provides
 2. Explain what the VLNDC is:
 1. “The Victim Legal Network of DC provides individuals impacted by crime access to 10 different legal service organizations that may be able to provide free or low cost legal help in a variety of legal issues stemming from the crime you experienced. These legal issues include crime victims’ rights representation, family law, immigration, housing legal services, consumer issues, and others.”
 3. Explain the referral process:
 1. “I will share your information with the VLNDC Navigator – she’s an attorney who will screen your case and identify the best organization to meet your needs.”
 2. “She will then send your name, gender, and DOB to this organization so that they can run a conflicts check. Once they confirm there are no conflicts, they will receive the intake information I’ve sent. That organization will then contact you at the phone number you’ve provided. This should all happen in one week.”
 3. “If there is no one who can assist you, then the VLNDC Navigator, Ms. Smith, will contact you and give you some other resources you can follow up with yourself.”

4. “Anyone who contacts you through this process should mention, or refer to VLNDC so that you know it’s because of this form you signed / completed today.”
4. Explain that this process does not guarantee representation.
5. Ask the client whether they would like to proceed?
2. Provide a roadmap for the intake.
 1. There is a confidentiality form they will need to review and sign. Explain that the form allows the client to understand and be in control of how their information will be shared.
 2. There will be intake questions that are asked to best place their case with the appropriate and available legal service organization.
3. Complete the Informed Consent Release form
 1. Every VLNDC referral must be accompanied with a completed Informed Consent Form. Please review the guidelines to explaining the form below.
 2. There are two ways to have the client complete the form:
 1. The client can sign a hard copy and the Facilitator will subsequently upload a picture or PDF of the completed form in the VLNDC Intake Form on the Member Portal.
 2. The Facilitator can use the Member Portal to email the client a link to a webpage where the client can use a computer or smartphone to complete the form. Once the client completes and submits the form, the Facilitator will need to review the completed form on the Member Portal to confirm that it was correctly completed. The completed form will be automatically attached to the VLNDC Intake Form when it is submitted to the Navigator.
 1. If the form is incorrectly completed, the client can use the same link that was previously sent to their email address to re-submit the form.
 3. Successful Completion of the Form
 1. Client’s name is correctly completed in the Client’s Name field on top, the Signature field at the bottom, and the Name field below the Signature field.
 2. The Expiration Date for the release is a date sufficiently far enough in advance (at least a week).
 3. Today’s Date next to the Signature field is correct.
 4. At least one Member Organization has been selected.
4. Completing the VLNDC Intake form.
 1. Basics
 1. Available Online
 1. This form is available as the Add Case page on the VLNDC Member Portal. To submit a referral to the Navigator, this must be completed and submitted.
 2. Hard Copies

1. There are hard copies of this form available in the Document Library on the VLNDC Member Portal. Some organizations print these out and have them available to direct services staff and volunteers at brief advice clinics. Completed hard copies are then given to the Facilitator to copy into the online form on the VLNDC Member Portal.
2. Victim's and Opposing Party's Information
 1. Complete all of the fields in the sections on the Victim's Information and the Opposing Party's Information, if that's available.
3. Criminal Activity Information
 1. When you get to the Criminal Activity section, use what've you learned from speaking to the client to complete the relevant checkboxes. If something the client said suggests they were a victim of another crime that they haven't specifically identified, ask them if they were impacted by that crime. You do not need to go through every crime and ask them if they were a victim of each one.
4. Legal Issues for Referral
 1. Allow what the client has asked help for to guide your responses. Allow them to describe what type of help they are looking for and whether they have any upcoming court dates. If the client's response suggests that they may need legal help for a legal issues they did not identify, refer back to the information they provided that suggests they may have this legal need and ask if they may need help with that legal issue.
 2. To confirm you've identifies all of their legal needs, review the legal issues on the VLNDC intake form to ask whether they may have one or two additional issues given the information they've told you about.
 3. Summarize the legal needs that you've discussed with the client and ask whether there is any other legal need that they may need help with.
5. Additional Information
 1. Add case specifics and relevant referral information in the text boxes at the bottom of the form.
6. Attaching Release Form
 1. If the Release Form was completed in person, attach the completed Informed Consent Release Form.
5. Discussing Next Steps.
 1. You will send their intake information and release form to the Navigator. The Navigator will review and place their cases with a legal organization if there is one available.
 2. If a member organization is available, that organization will reach out to the client directly within the next calendar week.
 3. If a member organization is not available, the Navigator will contact you with out-of-network referrals that may be able to assist you.
 4. If you don't hear from anyone about your case within 7 days, you can contact me to ask what the status of your case is.

Confidentiality and Privilege

1. VLNDC services are governed by the [DC Rules of Professional Conduct](#)
 1. VAWA Section 3 and FVPSA prohibit sharing personally identifying information about victims without informed, written, reasonably time-limited consent.
2. VLNDC services are predicated on a signed Informed Consent Release Form
 1. Informed Consent and why it's required:
 1. According to the DC Bar Rules of Professional Conduct, informed consent "denotes the agreement by a person to a proposed course of conduct after the lawyer has communicated adequate information and explanation about the material risks of and reasonably available alternatives to the proposed course of conduct."
 2. Attorneys must be sure that information regarding consent to sharing information is explained in a way that the consent is truly informed consent.
 2. Purpose of the Informed Consent Release Form
 1. Enables connecting victim to other service providers by sharing victim's confidential information.
 2. Reduces how often victim will have to provide relevant information to various entities for the purposes of an intake. A victim may need to review the information again with an attorney, but VLNDC is seeking to reduce how many times it happens.
3. Expiration Date
 1. Federal law (VAWA) requires a time limit to client's consent to release their information.
 2. Expires within 60 days of signing the form
 1. VLNDC recommends selecting a date that is 60 days from the date of signing in order to give adequate time to process the referral
 3. VLNDC will need client to complete the form again if there is a need to provide more referrals after that date.
4. Services Available
 1. Ask victim if they have questions about any of the Member Organizations – to explain their services, see one page sheet attached to the Informed Consent Release Form
 2. Advise victim that choosing not to select a particular Member Organization may limit VLNDC's ability to place the victim with an appropriate agency, or limit VLNDC's ability to find a Member Organization that can provide the services the victim requires.
5. Revoking Consent
 1. The client can choose to revoke consent to share information at any time.
 2. They must do so in writing (of any form) and submit that to same person, or organization, conducting the intake. That person must then submit the revocation to the VLNDC Navigator.
6. Conflict Checks

1. Legal organizations and attorneys are not ethically allowed to provide legal advice to parties who may have opposing interests, or are on opposite sides of the same case.
 2. First step is making sure that an opposing party, is not already represented by the receiving organization.
 3. VLNDC first shares the victim's name, DOB, and gender as well as opposing party's (if available) name, DOB, and gender.
 4. When Member Organization confirms there are no conflicts, that Member Organization will receive the victim's completed intake form.
7. Minor Victims
1. If a victim is under 18, we will not require the parent or guardian signature, as far as the victim can be afforded an appropriate attorney-client relationship.
 2. If the minor chooses to have a parent / guardian involved, it should be clarified that consent to disclosing information to VLNDC does not mean that VLNDC shares information with the client's parent guardian.
 3. *More information pending.*
8. What if a client needs to be referred back for an additional legal need?
1. If the Informed Consent Release Form has not expired, the client does not need to complete another form for an additional legal need.
 2. VLNDC recommends that the client's consent to be re-referred be documented in writing via a message attached with the case referral.

Urgent Referrals

1. Urgent Cases
 1. VLNDC Intakes can be marked "Urgent" in order to flag the case as requiring immediate attention from a Member Organization. Urgent cases can include court hearings, meetings, or deadlines within 5 days or less of the referral being sent to the Navigator.

How to Receive a VLNDC Referral

1. When a referral is sent to a Member Organization, the Member Portal will send an email notification to the Facilitator(s).
2. Non-Urgent Referrals
 1. Facilitators have 48 hours/2 business days to respond to a new referral by selecting either "Conflict," "Reject," or "Accept" in the Member Portal.
 1. If the referral is left unattended to beyond 48 hours/2 business days, the Navigator will send the referral to another Member Organization.
 2. If the referral is accepted, the Member Organization should make contact with the client within 48 hours / 2 business days.
3. Urgent Referrals
 1. In addition to receiving an email notification, the Navigator may contact a Facilitator or other staff at the Member Organization outside of the Member Portal, as determined by what was requested by the Member Organization in the Pre-Launch Meetings.

2. Facilitators have 24 hours/1 business day to respond to an urgent referral.
 1. If the referral is left unattended to beyond 24 hours/1 business day, the Navigator will send the referral to another Member Organization.
 3. If the urgent referral is accepted, the Member Organization should make contact with the client ASAP, and no later than 24 hours/1 business day.
4. Once representation of the client begins or the Member Organization has given brief advice to the client, the Facilitator should download or transfer the case information into their internal system and archive the case in the Member Portal.

From VLNDC Office Procedures Manual for Navigator:

I. Receiving Member Organizations' Referrals

A. Network Timelines

- i. Navigator responds to a referral
 1. Within 24 hours/1 business day
- ii. Marking a case as "Urgent"
 1. If there is a legal need that must be met within 48 hours

B. Process

- i. When the Navigator receives a referral from a Member Organization, the Navigator proceeds through the following process with the intention of connecting the client to a Member Organization within 72 hours of receiving the referral:
 1. Reviews the case submitted through the Portal
 2. Reviews the Informed Consent Release Form to note the expiration of the release and which Member Organizations the client permits the Navigator to release the client's case to.
 3. From the list of permitted Member Organizations, the Navigator reviews which Member Organizations provide the legal services that meet the client's needs.
 4. Reviews whether the client meets those Member Organizations' eligibility requirements.
 5. After narrowing the list of potential Member Organizations that the Navigator could refer the client to, the Navigator then reviews each of those organizations' recently-updated capacity information and their referral priorities to find the best match for the client.
 6. Once the Navigator identifies the Member Organization to refer the client to, the Navigator will send the Facilitator at such organization a conflict check through the Member Portal.
 - Navigator reviews whether the case is urgent. If the case is urgent, Navigator reviews the following table to follow any

urgent processes established with the receiving Member Organization.

Amara	Email [Contact Person] outside of the Portal
APALRC	Email [Contact Person] outside of the Portal
Ayuda	Email [Contact Person] outside of the Portal
Break the Cycle	Email [Contact Person] outside of the Portal
CARECEN	Email [Contact Person] outside of the Portal
DCVLP	Email [Contact Person] outside of the Portal
DV Clinic at AU	Email [Contact Person] outside of the Portal
Legal Aid	Email [Contact Person] outside of the Portal
LCE	Email [Contact Person] outside of the Portal
NVRDC	Email [Contact Person] outside of the Portal

- If case is sent to CARECEN or DV Clinic at AU, Navigator must email Facilitator outside of the Portal to notify that they were assigned a case.
 - Conflict check includes the client’s name, aliases, gender, and date of birth. Any of this information that is available on the opposing party is also included.
7. After receiving an email notification of the new referral, the Facilitator at the receiving organization will respond to the conflict check on the Member Portal by selecting either “Accept,” “Reject,” or “Conflict.” If the Facilitator selects one of the latter two options, the case will be kicked back to the Navigator, and the Navigator will select an alternative Member Organization to send the case to.

II. How to Handle VLNDC Intakes

A. Network Timelines

- i. Intakes conducted between 9AM and 5PM, M-F absent extenuating client circumstances.
- ii. Navigator Conducts an intake / reaches out to a client
 1. Within 24 hours/1 business day of request
- iii. After 3 attempts to reach the client, if we're unable to complete the necessary steps to complete a referral, we will notify the originating member and archive the case. We can make a note of that final communication in the case notes.
 1. if a client resurfaces, confirm that the contact information is the same, whether anything else changed since date of last conversation and then continue with next steps.
- iv. Providing timeframes to clients during intakes
 1. "If you don't hear from an organization within one calendar week, please don't hesitate to call me to learn the status of your case."

B. Accessibility

- i. For individuals who are LEP or deaf/hard-of-hearing, the Navigator will use the Ayuda Interpreter Bank (*see intake binder*).

C. Process

- i. When the Navigator receives a phone call, voicemail, or www.vlndc.org help form, the Navigator will conduct a phone intake by COB of the next business day.
- ii. The overall goal of a Navigator intake is to learn all the client's legal needs and to keep the intake brief (within 45 minutes).
- iii. The Navigator intake script is located in: [File Name].
- iv. If the client is unreachable, Navigator will attempt to call the individual 3 times (once per day and at different times of day). These attempts can be recorded in the notes section of the intake form.
- v. If working remotely, and it is necessary to call a client, the Navigator will use a Google Voice number.

D. Completing the Client Release Form

- i. Client has email
 1. Navigator will prioritize using the "Request Consent Link" built into the Portal and walking the client through the document as the client is viewing it.
 2. If client is unable to be on the phone while viewing the Consent form, Navigator will explain the consent form, have the client complete and submit it ASAP, and then resume the intake once the completed form is received.

- ii. Client does not have email
 - 1. Navigator will use best judgment to determine whether there may be an opportunity in the near future for the client to access email and Navigator can set up time to speak with the client while the client is accessing the form.
 - 2. If client will likely not have access to email in the near future, Navigator will propose one of the following options:
 - a. Client could come to NVRDC office to sign the form
 - b. Navigator could meet client at a library that's convenient for the client
 - 3. Navigator will not:
 - a. Go to a residential address
 - b. Wait longer than 15 minutes for client to arrive if there hasn't been any update from the client

E. Unique Scenarios

- i. That require placing client on hold and reaching out to Project Coordinator or Legal Directors immediately:
 - 1. Client has neither a safe telephone number or accessible email
 - 2. Client is insisting on a guarantee to get legal representation or advice on the call
- ii. Client offers Navigator extra documents or extra details
 - 1. Remind them that you will not be their attorney and they'll have to provide those later so you want to save them having to do it twice
- iii. If someone calls to inquire if a victim has contacted VLNDC:
 - 1. Unless you've spoken to the victim and obtained their permission to share their information with the person, you can neither confirm nor deny that you know who this client is.
 - 2. If it is a service provider, you can only reassure the service provider that if the victim did call, you would have taken the steps to connect them; and can share this information with them if the victim gives you permission to.
 - 3. If we speak to the victim and they give permission, record it in the case notes.
- iv. If another service provider contacts Navigator to inform Navigator that a particular victim will be contacted VLNDC:
 - 1. Thank them for the information, and when you speak to the victim ask if they are interested in us letting the provider know we connected.

III. Providing Out of Network Referrals

A. Resources

- i. The Navigator maintains a detailed list of [out of network referrals](#) regarding legal and social services victims may require.
- ii. This list is updated whenever the Navigator obtains any new organization information, capacity information or services.

B. Process

- i. Research any out-of-network organizations that may be able to assist the client with their legal needs
- ii. Create a list of those organizations that includes each organization's name, website, email, phone number, intake hours, and any other appropriate information.
- iii. Review how it's safe to contact the client and whether client has any contact preferences.
- iv. If it is safe to call the client, Navigator will use this mode of communication and will follow the script below:
 1. "Hello, is this [NAME]?"
 - If it is someone else, respond, "Thank you. I'll call back another time."
 - If the client responds that it is [NAME] proceed to script:
 2. "My name is Alexandra and I'm calling from the Victim Legal Network of DC. I received your case from [REFERRING ORGANIZATION]. Thanks for your patience with waiting for our Network to review your case. Unfortunately, the Network is unable to take on your case at this time. However, I do have a list of possible organizations that may be able to assist you with your legal needs."
 3. "If you would like, I can send this list to your email. If you would rather go over them on the phone together, we can also do that. I wish you the best with your case."

Georgia VLAN Referral Protocol

The purpose of the Georgia VLAN Referral Protocol is to set up policies for assuring that callers who contact one agency are appropriately and safely referred to partner agencies that can help to meet their needs. Georgia VLAN has adopted the policy of “no wrong door” so that each “victim of crime” caller who contacts any agency will be screened for the services of the contacted agency and then receives a “warm hand-off” to any other network partners who might be able to provide help to keep the caller secure safety or stability. The following protocol has been adopted to guide Partners in making referrals throughout the Network.

1. Always ensure that the caller is in a safe and comfortable place for completing an intake call to obtain necessary information to assess the caller’s legal and other needs. Offer to call back if they are driving, at work, or may be around AP.
2. On taking information confirm that the contact information by phone, email, or physical address is safe and that the caller wants us to contact her there.
3. After completing Intake, provide emergency referrals as needed and always refer to 24-hour hotline or shelter agency for Safety Planning: 1 800 334-HAVEN, or Sexual assault crisis number, GA Food Bank, Benefits Hotline, etc.
4. Always ask what the caller’s goals are. What does the caller want from this contact: Basic information, legal representation, referrals for services, financial/healthcare assistance.
5. Provide caller with information and options on her reason for calling.
6. Screen caller for family law issues: Family Violence Act Protective Orders, Stalking Orders, Divorces, Custody, Immigration Issues, and assess Network’s ability to respond to the need. Open family law case if this legal agency can respond to this need.
7. If Network does not have capability or capacity to respond to legal needs—attempt to identify and provide referral resources (i.e.: Georgia Trial Lawyer Association).
8. Screen caller for public benefits eligibility based on information provided. Ask follow up questions as needed. IE: Benefits Checklist.
9. Open an additional case for any assistance with Benefits. Have caller sign DFCS release form if assistance will include contacting DFCS on their behalf. When appropriate, obtain permission to create a Compass account to better monitor the application and submit necessary documents.
10. If referring to VLAN Network partner, determine how best to have caller sign a release form, if time allows.

11. If caller needs to/wants to speak with referring agency immediately, send redacted referral form to partner organization with only contact information and basic issue identification.
12. If necessary, Navigator may 3-way call in the Navigator for the Network or Partner agency.
14. Keep both completed Intake information and redacted referral information to submit blind data to research partner.
15. VLAN Partners will keep adequate records to provide legal representation and compile data information for research partner.

GEORGIA VICTIMS LEGAL ASSISTANCE NETWORK REFERRAL FORM

Name of screener: _____ Phone: _____ Email: _____

Screening Agency: _____

Date of Initial Screening: _____ Phone _____ or Walk-in _____ Date Referral Sent: _____

This Referral is Being Sent to (list agency): _____

Check box if potential client gives permission to share this information with agency listed above:

Information about Potential Client

Name (Please include middle initial): _____

Gender: Female Male Transgender Other: _____

Date of Birth: _____ Interpreter Needed? _____ Language: _____

Ethnicity (check all that apply): Asian/Pacific Islander Black Hispanic Latino/Latina
 Multiracial Native American White Other: _____

Primary Phone: _____ Is this a safe number? _____ Alt. Phone(s): _____

Email: _____ City and County of Residence: _____

Preferred Method of Contact: _____

Total Monthly _____ (circle one) Household Income: \$ _____

Source of Funds/Income: Child Support Disability Employment Food Stamps Pension
 Social Security Employment Spousal Support SSI TANF Unemployment
 Veteran's Benefits Worker's Compensation Other or Unknown: _____

If some or all household income is not accessible, please explain: _____

Adults in Household: _____ # Children in Household: _____ Ages of Children: _____

Marital Status: Never Married Married Living Together Divorced Separated Widowed

Adverse / Opposing Party (Please include middle initial; if more than one, please use additional sheet)

Name: _____ Address: _____

Aliases: _____ Date of Birth (list as much as is known): _____

Case-related deadlines and court dates for applicant or adverse party (list date and nature): _____

Is assistance requested related to being the victim of any of the following crimes (check all that apply):

Domestic Violence Rape Sexual Assault Physical Assault Child Abuse Human Trafficking
 Elder Abuse Kidnapping Robbery Identity Theft Fraud Theft Stalking Assault
Other: _____

Where did the crime occur (county, state)? _____ When did the crime occur? _____

Was the crime reported to anyone? _____ If yes, to whom? _____

Has the applicant been a victim of any other crimes unrelated to the assistance being requested?

Domestic Violence Rape Sexual Assault Physical Assault Child Abuse Human Trafficking
 Elder Abuse Kidnapping Robbery Identity Theft Fraud Theft Stalking Assault
Other: _____

Where did this other crime occur (county, state)? _____ When did the crime occur? _____

Was this other crime reported to anyone? _____ If yes, to whom? _____

Legal Assistance Requested (check all that apply for this specific referral):

Family: Divorce Custody Child Support Protective Order Legitimation Other: _____
Immigration: VAWA Petition U-Visa Asylum T-Visa Other: _____
Housing: Eviction Repairs (rental) Other Landlord-Tenant Foreclosure/Homeownership
Consumer: Bankruptcy Debt-Collection Credit Reporting Identity Theft Other: _____
Public Benefits: Food Stamps Social Security TANF Disability Other: _____
Other: _____

Non-Legal Assistance Requested (check all that apply for referral):

Food Clothing Emerg. Shelter Child Care Safety Planning Support Group Counseling
 Victim Assistance Medical Transportation Job Training ESL Classes Other: _____

For Receiving Agency Only:

Date received: _____ Date Potential Client Contacted: _____

Outcome of Referral (Rejected & Informed; Appointment Date, etc.): _____

NEITHER THE COMPLETION NOR TRANSMITTAL OF THIS FORM ESTABLISHES AN ATTORNEY-CLIENT RELATIONSHIP BETWEEN THE APPLICANT AND EITHER THE TRANSMITTING OR RECEIVING AGENCY.

Georgia VLAN

RELEASE OF INFORMATION

I, _____, give my permission to
_____ (agency) and its attorneys and/or staff to discuss my case with
other persons or agencies for the purpose of investigation, representation, and the provision of assistance.

This release applies to all records and information shared with the agency. This agency can contact other persons or agencies about my information if it will help my legal case. This may include getting services or working on my legal case to obtain services or assistance.

The information will only be used for the reasons described above. This release will last **FOR NINETY DAYS**. I understand that I may take back my consent at any time except when limited by state or federal law.

Confidentiality Statement: The privacy of my information and records is protected by state and federal laws and regulations. Georgia attorney-client confidentiality requirements are set forth by the State Bar of Georgia. I have been notified how to get information contained in my file. Some network partner agencies may have staff who are required to report possible child or elder abuse to the state.

SIGNATURE

Date

*The Georgia Victim Legal Assistance Network is a network of agencies coming
together to provide wraparound services for victims of crime.*