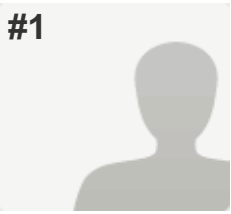


#1



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 2:44:36 PM  
**Last Modified:** Tuesday, February 23, 2016 2:55:54 PM  
**Time Spent:** 00:11:17  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	General administration staff
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	None, I don't refer to others within my agency
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Not having to print and being able to fax from computer would be quicker
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	None, I don't refer outside of my primary agency
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	More information is needed on referrals all clients should have a referral of some sort from GP, specialist, other organisation
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history,  
Other (please specify)  
medical list along with relevant pathology/xray/us etc

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Benalla Who, What, Where?, Google,  
Benalla Health Intranet/Email lists,  
Benalla Rural City Intranet/Email lists,  
Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

More communication between departments so everyone has the knowledge of what each area covers.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

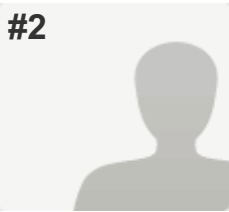
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#2



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 2:52:37 PM  
**Last Modified:** Tuesday, February 23, 2016 2:58:59 PM  
**Time Spent:** 00:06:21  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (hardcopy), Internal referral form, Phone call, Email, Uniti / Software Message system
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	No SCTT involved. A single method, preferably electronic that records the referral on the clients medical record.
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), SCTT (hardcopy), Letter (via email/scanning), Letter (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	This is hard to do as there is challenges with a single electronic referral system to outside agencies.
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google, Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

WE are not perfect but I think we handle these presentations and clients well if they are not in the right place when they come here.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

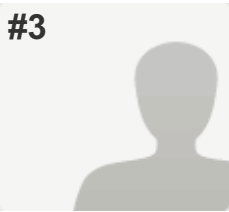
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Unsure/don't know

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? No

#3



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 2:49:45 PM  
**Last Modified:** Tuesday, February 23, 2016 3:00:39 PM  
**Time Spent:** 00:10:53  
**IP Address:** 203.37.226.166

**PAGE 1: Referral Systems**

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	One standard for all, don't care which method.
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	It should be a standard agreed referral process don't really care 'how' but an agreed method.
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	<p>Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)</p> <p>,</p> <p>Client's nominated GP details ,</p> <p>Client's case manager details (where applicable) ,</p> <p>Reason for referral (why you are asking the service to see the client)</p> <p>,</p> <p>Other (please specify)  any other specific relevant information that would be beneficial to the referee.</p>

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Medical history,  
Other (please specify)  
latest relevant tests/studies conducted.

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

By clinicians looking at the client outside of their clinical role and looking at the client holistically. Put themselves in their shoes how would they like to be treated.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

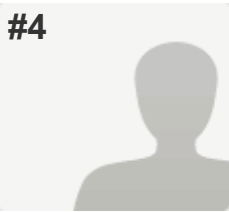
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Unsure/don't know

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#4



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 2:37:08 PM  
**Last Modified:** Tuesday, February 23, 2016 3:15:17 PM  
**Time Spent:** 00:38:09  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison), Key Worker
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning), Internal referral form, Uniti / Software Message system
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
More consistency around the use of internal referral form in CH.	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Condensing the SCTT tool. Does sometimes appear to be repetitive.	
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details, Client's case manager details (where applicable), Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Home visit risk screen (where applicable), Medical history, Social history



## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Benalla Health Intranet/Email lists,  
Website of relevant agency/ies,  
Other (please specify)  
Contact agency to get specific contact detail of clinician

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Improve knowledge across the board about the referral criteria for certain programs e.g. HIP, REACH

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

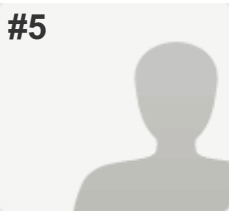
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? No

#5



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 3:17:19 PM  
**Last Modified:** Tuesday, February 23, 2016 3:25:48 PM  
**Time Spent:** 00:08:28  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning), SCTT (hardcopy), Phone call, Email
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
One consistent method- possible an internal referral information form particularly if the client is already listed on the service	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), Letter (via email/scanning), Letter (hardcopy), Email
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Again one consistent method for referrals	
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client's nominated GP details , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Medical history
<b>Q9: Ideally, when you receive a referral what information would it contain:Tick all that apply.</b>	Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Medical history
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Department of Human Services Directory , Benalla Who, What, Where?, Benalla Rural City Intranet/Email lists

PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

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**Q12: How do you think your agency could better apply the No Wrong Door concept?**

All workers should be identifying and referring clients- more training on how to refer internally

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PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

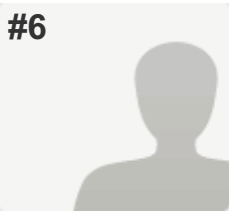
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? No

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#6



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, February 23, 2016 3:31:39 PM  
**Last Modified:** Tuesday, February 23, 2016 3:35:30 PM  
**Time Spent:** 00:03:50  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison), Key Worker
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Internal referral form
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b> Unsure	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b> Unsure	
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Reason for referral (why you are asking the service to see the client) , Reason client was seeing you
<b>Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Reason for referral (why you are asking the service to see the client)
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Yellow pages

PAGE 2: No Wrong Door

## Pathways to Safety (Pre)

### Q11: With the above in mind, please respond to the following statements

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Excellently

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### Q12: How do you think your agency could better apply the No Wrong Door concept?

Unsure

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## PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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### Q13: Please respond to the following statements:

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Unsure/don't know

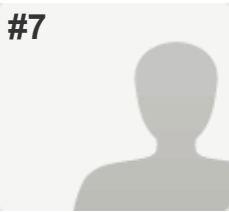
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#7



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 7:29:43 AM  
**Last Modified:** Wednesday, February 24, 2016 7:33:36 AM  
**Time Spent:** 00:03:52  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Uniti / Software Message system , Internal referral form, Other (please specify) Face to face discussion
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
Everyone using one system and documenting the process in notes accurately. Staff need to be clear on the reason for referral and give as much relevant information as possible	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Letter (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Reliable e-referral system	
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Social history, Medical history, Reason client was seeing you, Reason for referral (why you are asking the service to see the client) , Client's case manager details (where applicable), Client's nominated GP details , Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Social history, Medical history,  
Reason client was seeing you,  
Reason for referral (why you are asking the service to see the client)  
,  
Client's case manager details (where applicable),  
Client's nominated GP details,  
Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Connecting Care,  
Department of Human Services Directory

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

I think our Intake system does this well. Staff probably require more education about considering the 'whole client'

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

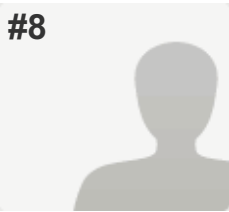
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#8



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 7:34:11 AM  
**Last Modified:** Wednesday, February 24, 2016 7:43:40 AM  
**Time Spent:** 00:09:29  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Email
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Simple, user friendly and minimal time consuming referral form
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Letter (via email/scanning), Letter (hardcopy), Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	What ever the referral pathway it must be kept simple and user friendly - email, software message system
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details, Client's case manager details (where applicable), Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Home visit risk screen (where applicable), Medical history, Social history



## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Benalla Who, What, Where?, Google,  
Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Continue to keep up to date with latest concepts and approaches to service delivery to improve

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

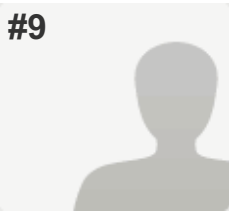
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? No

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#9



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 7:42:49 AM  
**Last Modified:** Wednesday, February 24, 2016 8:00:10 AM  
**Time Spent:** 00:17:21  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Uniti / Software Message system
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Present system per uniti works well within SACS / HARP
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Letter (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	As Physios we get a number of self referrals. An efficient and timely way of obtaining a current client Health Summary from the GP would be valuable.
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Provision of reception support in DCC for Allied health, HR and Day Care would mean that clients enquiries / referrals were dealt with more efficiently.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#10



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 7:49:52 AM  
**Last Modified:** Wednesday, February 24, 2016 8:04:31 AM  
**Time Spent:** 00:14:39  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

**Q1: Which agency do you work for?** Benalla Health

**Q2: If you work for Benalla Health, which department do you predominantly work in?** Other (please specify)  
Health Independence Programs

**Q3: What is your agency's intake method?** Central point (Intake worker/Client Liaison)

**Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)** SCTT (via email/scanning),  
 Uniti / Software Message system ,  
 Other (please specify)  
 above process if referral is within HIP, otherwise require redirecting back to Intake.

**Q5: How do you think the current INTERNAL referral pathways could be improved?**  
 HIP process is working really well as far as I am aware;  
 Referrals from Benalla Health Acute to Post Acute Care (part of HIP) are extremely lacking in detail in all areas of the referral, from client contact details, admission or discharge summary (neither supplied in majority of cases), service required, and more. Improvement in this area would be providing more detail in the referral to get it to an appropriate professional standard.

**Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)** SCTT (via email/scanning), SCTT (hardcopy)

**Q7: How do you think the current EXTERNAL referral pathways could be improved?**  
 HIP process is working really well as far as I am aware.

**Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.** Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
 ,  
 Client's nominated GP details ,  
 Client's case manager details (where applicable) ,  
 Reason for referral (why you are asking the service to see the client)  
 ,  
 Home visit risk screen (where applicable) ,  
 Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history,  
Other (please specify)  
Reason for referral, with explanation as to the problems/issues incurred to lead to referral.

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Benalla Health Intranet/Email lists,  
Benalla Rural City Intranet/Email lists,  
Website of relevant agency/ies,  
Other (please specify)  
Phone call to known agency to confirm details.

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery?      Excellently

How well do you think your AGENCY applies the NWD approach to service delivery?      Excellently

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

I believe HIP practices are in line with above as we are a multidisciplinary team, that also liaises closely with Benalla Rural City, and with client's GP.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

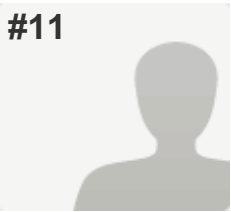
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#11



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 8:18:46 AM  
**Last Modified:** Wednesday, February 24, 2016 8:32:56 AM  
**Time Spent:** 00:14:10  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Other (please specify) Health Independence Programs
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning), SCTT (hardcopy), Uniti / Software Message system
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Per feedback already provided to Director Neil Stott
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	HIP team refer internally and externally on a daily basis and follow the CHPCP SCTT process as best practice.
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details, Client's case manager details (where applicable), Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Home visit risk screen (where applicable), Medical history, Social history, Other (please specify) HIP provides a full compiment of SCTT per HIP Manager instructions + any other relevant documentation

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history,  
Other (please specify)  
Other relevant medical investigations e.g. RFTs/echocardiograms/HbA1c/pathology/wound care/falls risk/shower assessment/OT assessment/Functional summary/consent/other services involved.

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Department of Human Services Directory, Google,  
Benalla Health Intranet/Email lists,  
Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Improve REACH functionality via Coordination.  
Improve inter-departmental referral processes.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.



**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

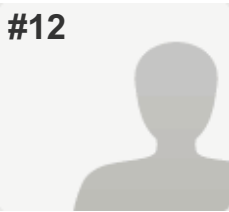
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#12



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 8:00:02 AM  
**Last Modified:** Wednesday, February 24, 2016 8:56:48 AM  
**Time Spent:** 00:56:45  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Phone call, Other (please specify) Verbal discussion with client, to make own referrals as necessary, secondary consultation with worker
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Acknowledgement of informal referral, using secondary consultation
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	As I see clients in group situations, I tend to encourage clients to self refer, or discuss referral needs with main treating health professional ,to ensure good case management and communication
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) ,  Client's nominated GP details ,  Client's case manager details (where applicable) ,  Reason for referral (why you are asking the service to see the client) ,  Reason client was seeing you ,  Home visit risk screen (where applicable) ,  Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history,  
Other (please specify) Clinet consent to share details

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Benalla Who, What, Where?,  
Other (please specify)  
My professional networks, secondary consultation

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Updated agency details in central location, encourage health literacy for clients , ensure Betterhealth channel is updated and available to all

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

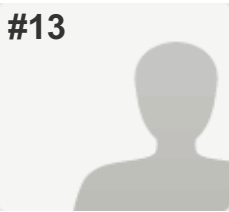
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#13



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 11:07:18 AM  
**Last Modified:** Wednesday, February 24, 2016 11:14:03 AM  
**Time Spent:** 00:06:45  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Home Nursing Service/Palliative Care
<b>Q3: What is your agency's intake method?</b>	Not sure/Unknown, Other (please specify) ANUMS in DNS and Pall Care CNS for Pall care
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	None, I don't refer to others within my agency , Other (please specify) SCTT fax
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Complete information provided on referrals if not available on accessible electronic system
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	?
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Average

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

?

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

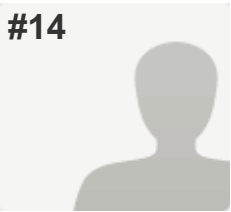
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? No

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#14



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 11:32:20 AM  
**Last Modified:** Wednesday, February 24, 2016 12:12:34 PM  
**Time Spent:** 00:40:13  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Home Nursing Service/Palliative Care
<b>Q3: What is your agency's intake method?</b>	Not sure/Unknown, Other (please specify) COMES TO CLINICAL COORDINATOR
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (hardcopy)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
Yes, I would like to see a simplified system that got better information for services without the convolutions of SCTT for referring staff.	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Resolution of the barriers to electronic sharing of information.	
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Other (please specify) I think we should use existing forms where possible, eg: acute could use GP admission summary.

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google, Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery?      Excellently

How well do you think your AGENCY applies the NWD approach to service delivery?      Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Difficult to promote unless staff see it as their responsibility. Because it relies on staff member engaging with consumer and then having knowledge of where the referral should go and acting on it the consumer often just gets hand balled to another department for them to do the problem solving. Often this is me, because I am an over engager!

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

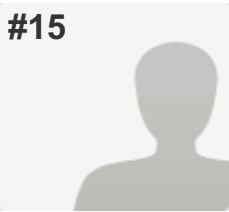
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care?      No

Have you accessed training to improve your knowledge about such issues?      No

Do you feel you could benefit from training in such issues?      Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander?      Yes

#15



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, February 24, 2016 4:04:38 PM  
**Last Modified:** Wednesday, February 24, 2016 4:10:16 PM  
**Time Spent:** 00:05:37  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Acute
<b>Q3: What is your agency's intake method?</b>	Not sure/Unknown
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (hardcopy), Internal referral form, Phone call
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	having a central fax number to send them to so hard copy could be placed in patient file to improve patient confidentiality.
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy), Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	email sctt reduce paper waste
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Medical history, Social history
<b>Q9: Ideally, when you receive a referral what information would it contain:Tick all that apply.</b>	Not applicable, I don't receive referrals
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Google



PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Below average

How well do you think your AGENCY applies the NWD approach to service delivery? Below average

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**Q12: How do you think your agency could better apply the No Wrong Door concept?**

improved intercommunication/connectedness between service providers

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PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Unsure/don't know

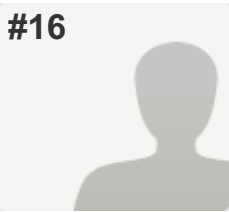
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#16



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, February 25, 2016 7:45:49 AM  
**Last Modified:** Thursday, February 25, 2016 7:57:47 AM  
**Time Spent:** 00:11:58  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Uniti / Software Message system , Internal referral form, SCTT (hardcopy), SCTT (via email/scanning)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
I clear documented procedure for all Internal referrals.	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy), SCTT (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Better education on UNITI and creating a SCTT	
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Medical history, Home visit risk screen (where applicable) , Reason for referral (why you are asking the service to see the client) , Client's case manager details (where applicable) , Client's nominated GP details , Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Medical history,  
Home visit risk screen (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Client's case manager details (where applicable),  
Client's nominated GP details,  
Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies,  
Benalla Health Intranet/Email lists, Google,  
Department of Human Services Directory

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

If a referral is not eligible for our service or there is a better service available - rather than reject the referral full stop, help the client to connect with the right services.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

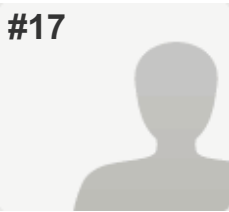
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#17



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, February 25, 2016 9:01:48 AM  
**Last Modified:** Thursday, February 25, 2016 9:33:04 AM  
**Time Spent:** 00:31:15  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Internal referral form
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	No
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	No
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Not applicable, I don't send referrals
<b>Q9: Ideally, when you receive a referral what information would it contain:Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Home visit risk screen (where applicable) , Medical history
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Google

PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Average

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**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Faster processing of sending out referrals

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PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

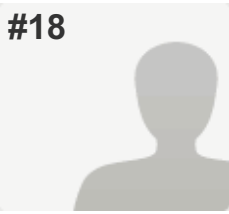
Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? No

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

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#18

**COMPLETE****Collector:** Web Link 1 (Web Link)**Started:** Friday, February 26, 2016 12:59:22 PM**Last Modified:** Friday, February 26, 2016 1:04:59 PM**Time Spent:** 00:05:36**IP Address:** 203.37.226.166

## PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Acute
<b>Q3: What is your agency's intake method?</b>	Individual service provider (the person you want to the client to see)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Phone call, SCTT (via email/scanning)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
Less bloody paperwork. If a SCOTT is attended why cant every service just get on the internet and look at that. Why do we have to fax it to every service. We should be able to fax just the cover sheet to all services needed	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Email, Phone call, SCTT (via email/scanning)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
As above	
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Medical history, Social history, Reason client was seeing you, Reason for referral (why you are asking the service to see the client) , Client's case manager details (where applicable), Client's nominated GP details, Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)
<b>Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.</b>	Not applicable, I don't receive referrals
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Yellow pages, Google

PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery?      Unsure/Don't know

How well do you think your AGENCY applies the NWD approach to service delivery?      Unsure/Don't know

---

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Don't know what this is

---

PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

---

**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care?      No

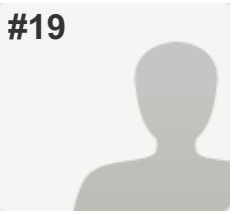
Have you accessed training to improve your knowledge about such issues?      Yes

Do you feel you could benefit from training in such issues?      No

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander?      No

---

#19



**COMPLETE**

*Answers Entered Manually*

**Collector:** Web Link - Manual Entry 1 (Web Link)

**Started:** Monday, February 29, 2016 12:16:52 PM

**Last Modified:** Monday, February 29, 2016 12:18:35 PM

**Time Spent:** 00:01:43

**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Gateway Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Internal referral form
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	null
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	null
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Medical history, Social history



## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

,

Client's nominated GP details,

Client's case manager details (where applicable),

Reason for referral (why you are asking the service to see the client)

,

Reason client was seeing you, Medical history,

Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Department of Human Services Directory, Google,

Benalla Health Intranet/Email lists,

Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

null

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

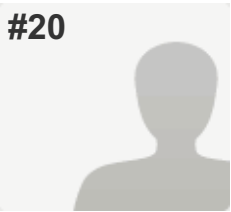
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#20



**COMPLETE**

*Answers Entered Manually*

**Collector:** Web Link - Manual Entry 1 (Web Link)

**Started:** Monday, February 29, 2016 12:18:57 PM

**Last Modified:** Monday, February 29, 2016 12:20:49 PM

**Time Spent:** 00:01:52

**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

**Q1: Which agency do you work for?**

Other (please specify)  
GV health/McGarth Foundation

**Q2: If you work for Benalla Health, which department do you predominantly work in?**

*Respondent skipped this question*

**Q3: What is your agency's intake method?**

Individual service provider (the person you want to the client to see)  
,  
Other,  
Other (please specify) From GP/Surgeon/Self

**Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)**

Phone call

**Q5: How do you think the current INTERNAL referral pathways could be improved?**

Happy with current processes

**Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)**

SCTT (via email/scanning), Letter (hardcopy),  
Phone call, Email

**Q7: How do you think the current EXTERNAL referral pathways could be improved?**

Null

**Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Home visit risk screen (where applicable),  
Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Average

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Null

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

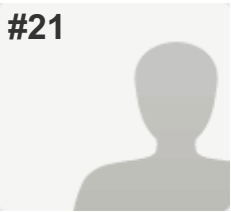
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? Unsure/don't know

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#21



**COMPLETE**

*Answers Entered Manually*

**Collector:** Web Link - Manual Entry 1 (Web Link)

**Started:** Monday, February 29, 2016 12:21:05 PM

**Last Modified:** Monday, February 29, 2016 12:22:13 PM

**Time Spent:** 00:01:08

**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Community Interlink
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	<i>Respondent skipped this question</i>
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Null
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Connecting Care/e-referral system, Letter (hardcopy), Phone call, Email
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	Null
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details, Client's case manager details (where applicable), Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Home visit risk screen (where applicable), Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google, Website of relevant agency/ies,  
Other (please specify) Phone book

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Null

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

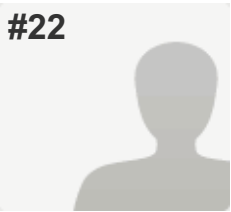
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#22



**COMPLETE**

*Answers Entered Manually*

**Collector:** Web Link - Manual Entry 1 (Web Link)

**Started:** Monday, February 29, 2016 12:22:25 PM

**Last Modified:** Monday, February 29, 2016 12:24:44 PM

**Time Spent:** 00:02:19

**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Community Interlink
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Not applicable
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Connecting Care/e-referral system, SCTT (hardcopy), Internal referral form, Phone call, Email
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
Consistency	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Connecting Care/e-referral system, SCTT (via email/scanning), Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
Null	
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Medical history, Social history,  
Other (please specify) ACAR

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Website of relevant agency/ies,  
Other (please specify) My Aged Care Gateway

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Hard in current changing climate- especially with NDIS coming in and other services being cut.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

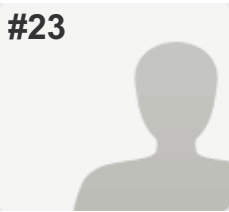
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? No

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#23



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Monday, February 29, 2016 5:33:56 PM  
**Last Modified:** Monday, February 29, 2016 5:41:48 PM  
**Time Spent:** 00:07:52  
**IP Address:** 203.37.226.166

**PAGE 1: Referral Systems**

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Acute
<b>Q3: What is your agency's intake method?</b>	Individual service provider (the person you want to the client to see)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (hardcopy), Internal referral form, Letter (via email/scanning), Phone call, Email
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	Use e-mail instead of hard copy or fax
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), Letter (via email/scanning), Letter (hardcopy), Phone call, Email
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	Use e-mail instead of hard copy or fax
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s), Client's nominated GP details, Reason for referral (why you are asking the service to see the client), Reason client was seeing you, Medical history



## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

,

Client's nominated GP details,

Client's case manager details (where applicable),

Reason for referral (why you are asking the service to see the client)

,

Reason client was seeing you, Medical history,

Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google, Yellow pages,

Benalla Health Intranet/Email lists,

Benalla Rural City Intranet/Email lists,

Website of relevant agency/ies

## PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Unsure/Don't know

How well do you think your AGENCY applies the NWD approach to service delivery? Unsure/Don't know

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

-

## PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

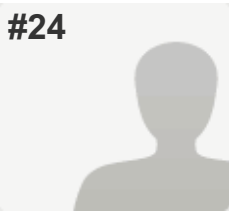
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? No

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#24



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, March 08, 2016 2:57:46 PM  
**Last Modified:** Tuesday, March 08, 2016 3:03:08 PM  
**Time Spent:** 00:05:21  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Internal referral form, Email
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	
By using Unity email	
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	
By receiving referral confirmations.	
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Reason client was seeing you , Home visit risk screen (where applicable) , Medical history, Social history

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history,  
Other (please specify) Pathology and test results.

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Very well

How well do you think your AGENCY applies the NWD approach to service delivery? Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Ensuring the client has a good understanding of the referral and what it means.

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

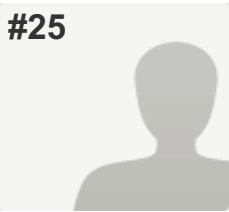
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#25



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Tuesday, March 08, 2016 3:27:50 PM  
**Last Modified:** Tuesday, March 08, 2016 3:57:16 PM  
**Time Spent:** 00:29:25  
**IP Address:** 203.37.226.166

**PAGE 1: Referral Systems**

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	None, I don't refer to others within my agency
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	I don't use, so not qualified to answer.
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	None, I don't refer outside of my primary agency
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	I don't use so not qualified to answer.
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Not applicable, I don't send referrals
<b>Q9: Ideally, when you receive a referral what information would it contain:Tick all that apply.</b>	Not applicable, I don't receive referrals
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Google

**PAGE 2: No Wrong Door**

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery?	Very well
How well do you think your AGENCY applies the NWD approach to service delivery?	Very well

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Keeping updated to ensure we all have the correct information to pass on to clients.

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**PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.**

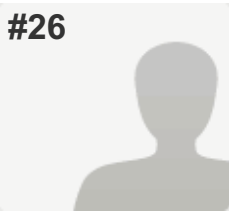
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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care?	Yes
Have you accessed training to improve your knowledge about such issues?	Yes
Do you feel you could benefit from training in such issues?	Unsure/don't know
Do you ask your clients if they identify as Aboriginal or Torres Strait Islander?	Yes

---

#26



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, March 09, 2016 7:08:45 AM  
**Last Modified:** Wednesday, March 09, 2016 7:15:17 AM  
**Time Spent:** 00:06:31  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Home Nursing Service/Palliative Care
<b>Q3: What is your agency's intake method?</b>	Individual service provider (the person you want to the client to see)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	SCTT (via email/scanning), SCTT (hardcopy)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	No further information to give
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	SCTT (via email/scanning), SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	Service direct email - and email system encrypted.
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	<p>Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)</p> <p>,</p> <p>Client's nominated GP details ,</p> <p>Client's case manager details (where applicable) ,</p> <p>Social history, Medical history,</p> <p>Home visit risk screen (where applicable) ,</p> <p>Reason client was seeing you ,</p> <p>Reason for referral (why you are asking the service to see the client)</p>

## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Social history, Medical history,  
Home visit risk screen (where applicable),  
Reason client was seeing you,  
Reason for referral (why you are asking the service to see the client)  
,  
Client's case manager details (where applicable),  
Client's nominated GP details,  
Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Average

How well do you think your AGENCY applies the NWD approach to service delivery? Average

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

Yes

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

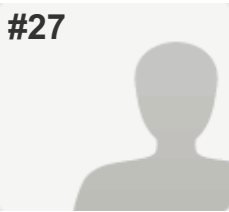
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Yes

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? No

#27



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, March 09, 2016 8:38:09 AM  
**Last Modified:** Wednesday, March 09, 2016 9:15:16 AM  
**Time Spent:** 00:37:07  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Urgent Care
<b>Q3: What is your agency's intake method?</b>	Other, Other (please specify) nursing
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Phone call, Other (please specify) direct email, scanning, and faxing perhaps to people concern
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	as above
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Letter (hardcopy), Phone call
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	as above
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details, Client's case manager details (where applicable), Reason for referral (why you are asking the service to see the client) , Reason client was seeing you, Home visit risk screen (where applicable), Medical history, Social history



## Pathways to Safety (Pre)

**Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.**

Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)  
,  
Client's nominated GP details,  
Client's case manager details (where applicable),  
Reason for referral (why you are asking the service to see the client)  
,  
Reason client was seeing you,  
Home visit risk screen (where applicable),  
Medical history, Social history

**Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?**

Google, Yellow pages,  
Website of relevant agency/ies

### PAGE 2: No Wrong Door

**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Unsure/Don't know

How well do you think your AGENCY applies the NWD approach to service delivery? Unsure/Don't know

**Q12: How do you think your agency could better apply the No Wrong Door concept?**

excellent

### PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

**Q13: Please respond to the following statements:**

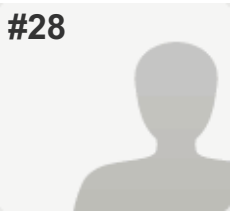
Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? Unsure/don't know

Have you accessed training to improve your knowledge about such issues? No

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? Yes

#28



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, March 10, 2016 7:44:14 AM  
**Last Modified:** Thursday, March 10, 2016 8:01:57 AM  
**Time Spent:** 00:17:42  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Community Health
<b>Q3: What is your agency's intake method?</b>	Central point (Intake worker/Client Liaison)
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	None, I don't refer to others within my agency
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	-
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Email
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	-
<b>Q8: What information do you think you should include when you send a referral to another service/agency?Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)
<b>Q9: Ideally, when you receive a referral what information would it contain:Tick all that apply.</b>	Client information and contact details (including DOB, Next of Kin, Address, Phone number/s) , Client's nominated GP details , Client's case manager details (where applicable) , Reason for referral (why you are asking the service to see the client) , Home visit risk screen (where applicable) , Medical history, Social history
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Google

PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery?      Unsure/Don't know

How well do you think your AGENCY applies the NWD approach to service delivery?      Very well

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**Q12: How do you think your agency could better apply the No Wrong Door concept?**

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PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care?      Yes

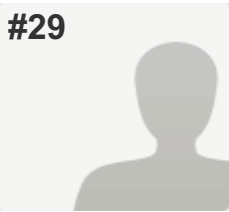
Have you accessed training to improve your knowledge about such issues?      Yes

Do you feel you could benefit from training in such issues?      Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander?      Yes

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#29



**COMPLETE**

**Collector:** Web Link 1 (Web Link)  
**Started:** Friday, March 11, 2016 2:09:26 PM  
**Last Modified:** Friday, March 11, 2016 2:15:04 PM  
**Time Spent:** 00:05:38  
**IP Address:** 203.37.226.166

PAGE 1: Referral Systems

<b>Q1: Which agency do you work for?</b>	Benalla Health
<b>Q2: If you work for Benalla Health, which department do you predominantly work in?</b>	Acute
<b>Q3: What is your agency's intake method?</b>	General administration staff
<b>Q4: Please tick the method/s you use for INTERNAL referrals (within your own agency)</b>	Internal referral form, SCTT (hardcopy)
<b>Q5: How do you think the current INTERNAL referral pathways could be improved?</b>	save paper have on desktop and email.
<b>Q6: Please tick the method/s you use for EXTERNAL referrals (to refer outside your agency)</b>	Letter (hardcopy), SCTT (hardcopy)
<b>Q7: How do you think the current EXTERNAL referral pathways could be improved?</b>	email sc tts
<b>Q8: What information do you think you should include when you send a referral to another service/agency? Tick all that apply.</b>	Reason for referral (why you are asking the service to see the client) , Client's case manager details (where applicable), Client's nominated GP details, Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)
<b>Q9: Ideally, when you receive a referral what information would it contain: Tick all that apply.</b>	Reason for referral (why you are asking the service to see the client) , Client's case manager details (where applicable), Client's nominated GP details, Client information and contact details (including DOB, Next of Kin, Address, Phone number/s)
<b>Q10: Which systems do you use to locate health service provider details from? For example, if you wanted to refer a client to them or provide the client with contact details, how would you obtain them?</b>	Website of relevant agency/ies, Benalla Health Intranet/Email lists

PAGE 2: No Wrong Door

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**Q11: With the above in mind, please respond to the following statements**

How well do YOU apply the NWD approach to your service delivery? Not at all

How well do you think your AGENCY applies the NWD approach to service delivery? Poorly

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**Q12: How do you think your agency could better apply the No Wrong Door concept?**

improve staff knowledge of NWD

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PAGE 3: Working with those of Aboriginal or Torres Strait Islander background.

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**Q13: Please respond to the following statements:**

Do you feel you have an appropriate awareness of culturally diverse needs and the barriers some groups, particularly ASTI, face with regard to accessing health care? No

Have you accessed training to improve your knowledge about such issues? Yes

Do you feel you could benefit from training in such issues? Yes

Do you ask your clients if they identify as Aboriginal or Torres Strait Islander? No

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