



ARF Referral Form Tip Sheet

The LTC Referral Screening Form is intended to be a summary of the clinical information presented in the referral packet. It is the first impression the facility has of the referred client.

1. Ensure the form is correct and legible.
2. The contact name should be the person at the facility that the ARF can contact for more information, to arrange admission, or to ask questions.
3. Include all Risk Factors:
 - Include both historical and current risk factors documented in “Comments on Risk Factors” or “Dangerous Propensities” section of the form.
 - The risk factors noted should match the history and contents of the documentation in the packet.
 - The risk factors from the IMD/STP should match the Case Manager’s risk factor assessment or there is an explanation as to why not.
 - The comment section regarding the risk factors should indicate if the risk factors have or have not been resolved, if resolved include how they were resolved and when the last incident occurred.
 - Any risk factor that isn’t included in the check off section be included in the risk comment section, such as arson.
 - Provide details in all the comment sections.
4. Reason for Referral to This Level of Care should support why the client needs this level of care. It should state what has been tried in the past and why it did not work. Each referral should be individualized so that the important or unique qualities of each client stand out.
 - The reason for referral should be detailed as to why the client is being referred to an ARF program, not just that they are ready. Include what have they worked on and why a standard Board & Care Facility may not be sufficient for their needs.
5. Comments on Current Treatment should give both an overview of the treatment the client is currently receiving, and the client’s response to treatment. Details should include current medications, if PRNs are required, if the client going to groups and participating. Note specific examples. For example, “Client continues to have delusions that yellow pills are poison” provides a more accurate picture of the client than “Client is delusional”. Comments such as “See chart” do not summarize the treatment and do not provide information that will assist an ARF in determining whether or not a client is appropriate for admission.

Remember that this form is the **first** impression that the ARF has of the client who is being referred. The SF/LTC Referral Screening Form is a valuable place advocate that the client is appropriate for placement at the ARF level of care.