

SUNBEAM HOUSE SERVICES POLICY DOCUMENT



Policy Name	Referral, Entry, Transfer and Discharge Policy
Effective Date	04 April 2023

Document Control

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Version Control

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1.0	Senior Services Mgr	New Policy	All SHS
2.0	Senior Services Mgr	Review	All SHS
3.0	Senior Services Mgr	Updated to reflect changes to Referrals Committee structure & additional procedures	All SHS
4.0	Senior Services Mgr	Full review & update to entire policy. Change department no. from 013 Client Health & Wellbeing to 018 Referrals.	All SHS
5.0	Senior Services Mgr	Full review and updated to entire policy.	All SHS
6.0	Senior Services Mgr	Full review and update to entire policy. Addition of Residential Placement Prioritisation Form.	All SHS
7.0	Senior Services Mgr	1.0: Changes to scope- Residential emergency placement removed. 3.0: Criteria on documents accepted with external referrals added. 6.0: Title amended, update to changing needs clients. 8.0: Title amended, update to emergency respite placements.	All SHS

Policy Sign Off

CEO Signature	CEO Signature	Date
John McCormack (Interim CEO)		18 April 2023

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1.0 POLICY

This policy on Admissions, Internal and External Transfers and Discharges is guided by the Mission and Values of the organisation:

Sunbeam House Services provides a range of services to adults with intellectual disabilities. We aim to empower people with the necessary skills to live full and satisfying lives as equals citizens of their local communities.

Sunbeam House Services provides Day, Residential and Respite Services to individuals with a primary diagnosis of Intellectual Disability. Diagnosis of Intellectual Disability must be documented in a Psychological Assessment report by a health professional, e.g. a psychologist.

Sunbeam House Services adheres to the equal status act. This policy has been developed to:-

- Identify who Sunbeam House Services provides Supports and Services to
- Clarify how to apply for Services
- Outline Procedures on Admission, Transfers and Discharge, including Temporary Discharge and emergency placement

The Services provided by Sunbeam House Services include:-

- Residential supports and services, ranging from group home arrangements to individualised supports for people living in their own home
- Respite supports and services
- Day Services that incorporate training, employment supports, community participation and meaningful activities

2.0 SCOPE

The Sunbeam House Services Referrals Committee is directly responsible for every admission, transfer, and discharge. All admissions, transfers and discharges must go through the Referrals Committee.

The Referrals Committee is comprised of the following staff members: SHS Referrals Officer, Principal Social Worker or designate, Operations SSMs, Housing, Maintenance & Transport manager, and Facilities, Maintenance & Transport Manager or designate where applicable.

This Policy applies to:-

- New External Referrals-Day Service, Residential, Home support , Self directed supports
- Individuals currently in receipt of other SHS services seeking Residential Services
- Individuals seeking to Transfer within Sunbeam House Services
- Individuals currently in Receipt of Residential Services with changing needs

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- Respite
- Individuals seeking Emergency Respite
- Temporary Absence
- Discharge from Service
- Appeals

3.0 ROLES & RESPONSIBILITIES

All staff working in Sunbeam House Services are responsible for complying with policy guidelines as outlined in the Referral, Entry, Transfer and Discharge Procedures Document.

The Referrals Committees are responsible for coordinating this policy. Specific guidelines are outlined in the Referrals Committee Structures and Procedures Document.

The Referrals Committee shall cover the following areas:-

- External Referrals Committee: This committee covers New Referrals & Entries and existing individuals accessing services from Sunbeam House Services who wish to make an application for new additional services.
- Internal Referrals Committee: This committee covers transfers from one residential location to another, transfers from one day service to another, change of services as a result of changing needs within Sunbeam House Services and individuals exiting Sunbeam House Services.

The Referrals Committee will work closely with all departments to ensure appropriate placement and quality service to all individuals.

The Referrals Committee Policies along with the Procedures document will be reviewed every year by the Referrals Committee chairperson .

The Senior Management Team is responsible for final approval of recommendations made by the Referrals Committee except in the case of appeals.

4.0 New External Referrals-Clients Not Currently Availing of Any Existing Sunbeam House Services

New Referrals are considered to be individuals who are not currently in receipt of services or supports from Sunbeam House Services. Casual enquiries may be made by potential service users, family member or advocates. However, such enquiries do not form part of the application process.

New applications for support services must be made directly by the applicant, family or advocate to the HSE Disability Manager in the Community Healthcare office appropriate to the area they are

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domiciled. The HSE Disability Manager may then commission Sunbeam House Services to deliver support services to the individual referred by submitting a **Referral Form** or **letter of Referral**. The letter should provide information that is relevant to the person's placement including details of the current social and care needs, health care needs including current medications, current mental state, past psychiatric history, medical history, relevant risk factors, and other relevant information e.g., social circumstances, behaviour, alcohol, or drug problems.

Note: All New applications for a service within Sunbeam House Services (SHS) need to be notified, agreed and funded by the HSE, prior to any service being offered.

All services and supports are based on the resources available and the suitability and compatibility of the individual's needs. All requests for services and supports are processed when the necessary documentation has been received and meets specific Sunbeam House Services criteria and will ordinarily contain all relevant information pertaining to the potential service user from the previous service provider, HSE (e.g., social worker, case manager, service, etc.) and family members. All reports submitted by the HSE, prior to SHS accepting the Referral for assessment must be dated 3 years or less.

SHS's Referrals Committee will identify the most appropriate service for the person based on their needs and appoint a Client Services Manager to meet with the client and family to complete a Support Needs Assessment. Such visits enable us to gain a better insight to the support needs of the applicant and whether Sunbeam House Services can meet them.

4.1 Residential Referrals only

Unfortunately, residential placement is not a demand-led service. We work on a fair and equitable basis with regard to offering very rare vacancies. Should a vacancy arise, SHS's Referrals Committee will review the criteria and pathway, and identify an individual best suited to the placement. Once placement and funding has been approved between the HSE and SHS, SHS will communicate by letter, an offer of residential placement.

4.2 Day Service New Referrals only

Once funding and service quantum has been approved between the HSE and SHS for a day service, SHS will communicate by letter to the family to advise of the most suitable service and hours. The applicant will be contacted by the SHS Referrals Officer to advise of next steps. This will include the completion of forms, which we can assist them with.

A short sample placement to assist the applicant and/or their representatives and Sunbeam House Services to better understand the services and supports required by Sunbeam House Services may be arranged. This placement is **not** considered part of the Trial Period. Applicants must be accompanied throughout the Sample Period by staff from their current service. All placements will be subject to a Trial period, which will last 12 weeks, at the end of which the placement will be reviewed to ensure it

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is satisfactory . Following a successful trial period, SHS will notify the HSE that the placement has been successful.

Individuals accept the offer of Service Provision from Sunbeam House Services on the understanding that there is an initial 3 month Trial Period. The fact that a Referral is accepted as appropriate to Sunbeam House Services does not automatically mean that the individual will be able to access some or all of the services that he or she needs (this includes those receiving a shared service between Sunbeam House Services and another Service Provider).

5.0 Individuals currently in Receipt of Other Services seeking Residential Services

Where individuals are currently in receipt of other types of Services from Sunbeam House Services, (defined as Day Services, Home Support, Employment Supports, Respite) now express their wish to receive, or a need for Residential Support, SHS can support the individual with their application. The following steps are required-

- The CSM will complete a Residential Priority Placement form and submit it to the Referrals officer, this in turn will be reviewed by the Referrals Committee and the individual can then be placed on SHS Priority Residential list.
- An up to date HSE DSAMT form is also completed by the CSM with the family, this is submitted to the disability manager of the HSE by the Referrals Officer so that the individual can be placed on the HSE Residential list also.
- A social housing form is required to be sent into the local County council by the clients family/advocate, Sunbeam House Services social work team may provide support with this if required.

Sunbeam House Services is clear that being in receipt of Other service types does not automatically confer any rights to the receipt of a Residential placement, or expectation of same.

All Clients on the Residential Priority list, starting with those identified as Priority 1 are discussed by the Referrals Committee as each vacancy arises in Sunbeam House Services. Delivery of a Residential Service is dependent on the following-

- Availability of physical capacity
- Sunbeam House Services ability to provide suitable, safe supports to meet the individuals service requirements as determined in a comprehensive Support Needs Assessment (carried out by SHS)
- Compatability of cohabiting residents
- Agreed and confirmed funding between the HSE and Sunbeam House Services.

5.1 Individuals currently in Receipt of Services seeking any change to their current service/supports

Where individuals are currently in receipt of services (Residential, day services, home supports) and they wish to be referred for a change to their service/ supports within Sunbeam House Services, their

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request should be submitted to the Referrals officer by their CSM/SSM on an Internal Referral form. These requests will be assessed by the Referrals Committee. Approval of these requests will be dependent on agreed and confirmed funding between the HSE and Sunbeam House Services as per other changes.

6.0 Individuals seeking to Transfer within Sunbeam House Services

Transfers are where Individuals are currently in receipt of Residential or other services and wish to make an internal transfer from one Sunbeam House Services' location to another. Requests for an Internal Transfer must be submitted to Referrals Officer by the relevant CSM/SSM on an **Internal Referrals Form**. [Internal Referral Form F-018.041.xlsx](#)

Sunbeam House Services will support the individual, insofar as is reasonably practicable, in this choice, dependent on service capacity and suitability. Transfers can only be applicable to services for which the individual receives adequate funding.

If a Referral is not appropriate upon review by the Referrals Committee, the individual will be notified with an explanation of the outcome. This notification will be sent to the referrals committee and logged in the minutes to ensure appropriate recording of same.

7.0 Individuals currently in Receipt of Services with changing needs

Where individuals are currently in receipt of Residential services from Sunbeam House Service and, due to a change in their needs now require additional supports, SHS will advocate for these additional supports by completing a Support Needs Assessment Form and submitting this as well as a Business case to the HSE Disability Services Manager. Any further information required by the HSE will be submitted to them at their request. Any enhancement of services must be approved by the HSE prior to any changes being made.

Should a clients needs change beyond the scope of the SOP of the centre, a risk assessment will be completed. An updated needs assessment will be reviewed and if no measures can be implemented to address the clients needs in line with the profile and criteria set out in the SOP, a case meeting should be called with the HSE to seek an alternative for the client. All efforts will be made to address and align the clients changing needs to the criteria set out in the SOP , however the final decision to discharge will be determined by the SHS Referrals Committee.

8.0 Respite

Sunbeam House Services provides Respite to individuals within Community Healthcare East (CHE). New applications for Respite should be made directly to the HSE Central Respite Referrals Committee in the CHE. Once SHS has been appointed as the respite provider, the individual or the individual's support network should discuss their Respite request with the SHS service manager, who will advise them on the process. [HSE Respite Referral Form \(Amended February 2020\).docx](#)

Where a change of needs is identified that cannot be managed in line with the SOP, the resident will not receive respite until such time as appropriate supports can be put in place to meet the needs of the resident. If there are no appropriate supports that can be put in place, the entry,

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transfer and discharge policy will be followed and the primary funder will be alerted to same with a view to finding an appropriate alternative placement to meet the identified needs of the resident.

Where there are serious staffing constraints, the admission of residents to the respite designated centre will be reduced in order to provide a safe service in line with the staff resource available.

9.0 Individuals seeking Emergency Respite

Emergency placements will only be considered in the context of short term Respite; for no more than a 1 week period and from the current directory of residents whose needs match the SOP and have not changed. Emergency respite placements should still adhere to the criteria of the location in relation to physical environment, staffing available, compatibility of co-habitants. If additional resourcing is required this will be requested from HSE and placement will only be granted on the basis of receipt of same.

Current SHS respite clients may seek short term emergency respite from the respite locations Client service manager.

Sunbeam House Services do not offer emergency residential placements, however if a clients current SHS residential placement is deemed unsafe and an immediate move is required, SHS will source an emergency temporary placement.

10.0 Temporary Absences

A Temporary Absence may be deemed to be one of the following:

- Planned absences
- Unexpected absences
- Unexplained absences
- Frequent / Prolonged & Absence of Concern

11.0 Planned Absence

Temporary Absences may arise where an individual is being admitted to another service or hospital, or going home or on holiday for a substantial period of time. The CSM must submit a HSE Notification of extended absence form to the Referrals Officer, who will in turn forward it to the HSE. On the return of the individual, the CSM is responsible for ensuring that any relevant information is received and stored in the correct location for ease of access by relevant staff. The CSM is responsible for updating the Client Information Database (CID) of such information.

If a Residential client should require admission to hospital, respite home, rehabilitation facility, or nursing home for a short period of time and this is with the knowledge of the CSM/support staff this will allow for the CSM to put in place appropriate planning and supports.

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The following measures are taken:

- 11.1.1 The CSM will ensure that individuals are supported to plan for their absence.
- 11.1.2 Any risks associated with the planned absence should be assessed in accordance with the organisation's Risk Management Policy and Procedures.
- 11.1.3 The dates of the absence are noted on CID and in the individual's Personal Plan as appropriate.
- 11.1.4 Relevant information about the individual is provided to the agency taking responsibility for the care, support and well-being of the individual, for example, hospital or another place where applicable.
- 11.1.5 When the individual returns from a planned absence the CSM shall take all reasonable actions to ensure that all relevant information about the individual is obtained from the Service responsible for the individual during their absence.

12.0 Unexpected Absences

An unexpected absence is when an individual leaves the Service temporarily with the knowledge of the CSM/support staff, with the intention to return, but without advance notice to facilitate planning for the absence e.g., emergency absences, Pandemic related absences or last-minute changes in plans. In such cases the following steps should be taken:

- 12.1.1 In the case of emergency absence the procedures for a planned absence will be followed as far as is practicable within the timeframe allowed.
- 12.1.2 In the event of an emergency absence arising from serious injury to the individual, refer to the organisation's Incident Management Policy and Procedures.
- 12.1.3 In the event of emergency absence culminating in death outside the Service, refer to the organisation's procedures on management of the Unexpected Death of an Individual.

Note: CSMS of designated centres to ensure all relevant HIQA notifications are made in relation to any unplanned and unexpected absences

Note: In circumstances, such as a pandemic, there are extenuating circumstances for prolonged absences and such absences must be treated with vigilance.

12.2 Unexplained Absences

An unexplained absence is when an individual fails to attend their services when and where expected. In these circumstances:

- 12.2.1 The Missing Persons Procedures will be enacted as soon as the concern of an unexplained/unexpected absence emerges.

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- 12.2.2 The CSM/frontline staff on duty will contact the individual in the first instance to ascertain the reason for the absence. If staff are unable to make contact with the individual, they will contact the individual's family/representative/advocate as, per emergency contact details, to ascertain the reason for the absence.
- 12.2.3 Appropriate risk management procedures will be put in place to respond to unexplained absences.
- 12.2.4 Records are kept on CID in respect of any unexplained absence of an individual from his/her Service.

12.3 Frequent/Prolonged Absences & Absences of Concern

Where a concern is raised and/or a trend of unplanned absences is noted the following actions will be undertaken:-

- 12.3.1 The CSM will inform the SSM who may request a review or case conference together with the individual, their circle of support as appropriate and MDT as appropriate.
- 12.3.2 The CSM/SSM may request a review of service and support needs for the individual.
- 12.3.3 An independent advocate may also be sourced if the individual chooses.
- 12.3.4 If non-attendance persists the CHE Disability Manager is notified, and a plan is developed to assist the individual identify their support needs.

In all cases absences must be examined by the SSM for the area to determine if the placement is suitable to the client's support needs and preferences. In all cases where there is doubt about the continuing placement with Sunbeam House Services, engagement with the client and/or the client's advocate/family shall take place at the earliest time possible following identification of an issue around the placement (7.4.1).

Where it is determined that the client's continued care needs cannot be met within the funding provided by the HSE or other funder, an application for appropriate funding for 'changing needs' shall be presented to the funder by Sunbeam House Services. If such an application fails arrangements will be made to end the placement and assist the client and HSE to find an alternative suitable placement. In such an eventuality the Discharge from Service process shall apply.

In certain circumstances it may be determined that Sunbeam House Services cannot provide appropriate care and support needs to a client and in those circumstances arrangements will be made to end the placement and assist the client and HSE to find an alternative suitable placement. In such an eventuality the Discharge from Service process shall apply.

13.0 Discharge from Services

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Discharge from Services occurs in line with the client's will and preference or in extreme circumstances, where the service decides to cease delivery of services for an individual due to the service's inability to meet the care needs of the individual or where funding is insufficient to provide adequate supports to a client.

Where Clients have not attended services for a prolonged period of time the correct procedures will be put in place to support the client to re-engage with services, however if this is not successful, the discharge process will be implemented at **6 months of non attendance**.

13.1 Client discharging themselves from SHS services:

- Client decides to leave Sunbeam House Services through personal choice,
- Client wishes to transfer or relocate to an alternative Service Provider,
- Should a client wish to discharge themselves as they feel that SHS is unable to provide them with a safe and effective service, any such concerns should be thoroughly investigated.

13.2 SHS discharge of a client:

The discharge of a client where it is deemed outside of the capability or remit of Sunbeam House Services requires the input of an MDT assessment. In such circumstances discharge shall be the last resort and all avenues for additional supports should be explored including funding applications for changing needs and partnering with other organisations for care provision.

In circumstances where there is a likelihood that a client is to be discharged from the service (other than by personal choice) the SSM for the client's area shall convene a case review meeting which will include input from the CSM/DCSM for the client, the relevant SHS MDT members, the client and/or their family representative/advocate and the HSE (if possible). Following the case review meeting and having considered all of the circumstances for the client, including their assessed needs (carried out by SHS) and safety and SHS's ability to provide the care supports required for the client, the SSM shall issue a recommendation to the Referrals Committee which may be for discharge.

When the organisation can no longer provide a service to meet the assessed needs (carried out by SHS) and safety of the individual due to a cut/withdrawal of funding from the HSE it will be necessary to discharge the client from our service. In such a circumstance every effort will be made by Sunbeam House Services to advocate on behalf of the client to the HSE for sufficient funding for the delivery of their service.

Should funding cease for the placement from the relevant funding source (HSE, private fund, Trust, etc.) and no other funding source can be identified, this placement shall cease in a timely manner following submissions for assistance from the HSE or another funder. The family and HSE Disability Manager will be fully briefed of the need for the Client to leave, possibly at short notice, although every effort will be made to help and assist the Client in finding an alternative placement and in making a smooth transition.

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On discharge, the Referrals officer will send a Sunbeam House Services Discontinuation of service form to the individual or their advocate for completion.

Discharge from the service is also applied where an individual dies while in receipt of services. The Referrals Officer will inform the HSE in writing, and also The SHS Financial Controller.

A HSE Exit form is signed by the SSM and sent into the HSE by the Referrals Officer. A copy of all documentation is uploaded onto CID and the individual's profile is closed off by the Referrals Officer.

14.0 Appeals

The client or their advocate may appeal the decision of the Referrals Committee in relation to:

- a) Not offering a placement,
- b) Discharge of a client,
- c) Transfer of a client,

to the CEO of SHS within 10 working days of the notice of decision from the Referrals Committee. The grounds for appeal may include a breach of contract and/or a failure to give due consideration to the requirements of this policy or Regulations set out in the Health Act 2007 (Care and Support of Residents in Designated Centres (Children and Adults) Regulations Health Act 2013 - S.I. No. 367 of 2013. In all cases the CEO shall offer to source an independent advocate to assist the resident, day attendee, respite user or their family to assist with the appeal.

The outcome of the appeal may be to:

1. Uphold the decision of the Referral Committee.
2. Overturn the decision of the Referral Committee.
3. Postpone the enforcement of the decision of the Referral Committee pending further consideration and transition planning to ensure the client's assessed needs can be met.

Respite clients or their advocates must appeal to the HSE's Central Respite Referrals Committee.

Clients and their families or representatives must:

- (a) Be informed of the procedure for making an appeal and/or complaint and provided with a copy of the Appeals Procedure and/or the Complaints Procedure,
- (b) Be advised of the arrangements in place to ensure the Client has access to advocacy services for the purposes of making an appeal/complaint.

Additionally, the location of the complaints procedure that is displayed prominently in both Day and Residential Services must be brought to their attention.

The CEO must acknowledge receipt of the appeal against a discharge/transfer notice or a decision not to provide a service within 14 working days and s/he may appoint a suitable person either from within

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SHS resources or outside SHS if s/he considers this necessary, to investigate the grounds for not offering a service, discharge or transfer and the grounds for appeal.

The CEO will set out the Terms of Reference of the investigation into the appeal. Such an investigation shall commence within 14 working days of the dispatching of the acknowledgement letter to the appellant.

Within normal circumstances the appeal should be concluded within one calendar month of the appointment of the investigator.

The outcome of an investigation of an appeal shall be communicated in writing to the CEO by the investigator who shall then communicate the outcome of the appeal to the appellant within 7 working days of receipt of the investigators report.

Should the investigation period need to be extended the CEO shall notify the appellant of:

- The reason for the delay,
and
- The expected date of the conclusion of the investigation.

A discharge may not take place during an appeal process unless, continuing to provide a service would, in the opinion of the CEO, endanger the appellant.

Supporting Documentation:

Further information can be found in the following documents / booklets:

Referrals Committee Procedures

Information for Applicants and their Support Individuals

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