



## Important Information About Your Appointment

**Client Name:**..... **Date:**...../...../.....

### OUR ROLE

Our Role is to provide you with the support and information you need to make decisions.

We provide services on;

- Advice, financial assistance and/or appropriate referral for people needing assistance to manage a housing crisis;
- Information on private, public and community housing options;
- Advice on eligibility and assistance with applications for public housing;
- Secondary consultation for services assisting people in a housing crisis.

### OUTLINE OF APPOINTMENT (\*NO FEES ARE CHARGED FOR THIS SERVICE)

Throughout this interview, the Housing Intake Assessment and Planning Worker will aim to:

- Assist you to assess your housing needs
- Inform you of available options and resources to meet your needs
- Check if the options and resources you need are available and arrange access to them or;
- Assist you until the referral is complete or assist you to access alternative options

### YOUR ROLE

It is important that you participate fully in your appointment and supply the correct and necessary information about yourself and your situation as Staff need to make decisions based on accurate information to ensure they provide the right information and service to you. This will assist staff to provide you with the best possible advice and guide your decisions.

### YOUR RIGHTS

When using this service you have the right to; Respect, Dignity, Fairness, Participation, Flexibility and Privacy. For further information, please feel free to ask for a brochure on your rights and responsibilities.

YOU ALSO HAVE THE RESPONSIBILITY TO: Respect the rights of others to feel safe; respect the cultural backgrounds and privacy of others; treat others with respect and dignity.

### YOUR FEEDBACK - ASSISTING US TO IMPROVE SERVICES

You are able to contribute to the assistance you receive from CHL by providing us with feedback about our services. Please feel free to ask our staff for a Feedback Survey or alternatively these are located at our office locations at Reception for your use.

### YOUR RIGHT TO COMPLAIN

At Community Housing Ltd we aim to provide a high standard of service in all our areas of our operations. We recognise, however, that there will be occasions when people receiving services from us feel significantly affected by Community Housing Ltd's operations and may wish to comment on, or complain about an aspect of our service. For further information please refer to our Complaints Brochure available at Reception.



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### PRIVACY – YOUR INFORMATION IS CONFIDENTIAL

We only keep confidential written information which is necessary for any assistance or service that we can provide to you. Information we collect helps us to keep up-to-date details so that we can assist you in the best possible way. You have a say in what happens to your information. If you decide not to share some of your information, or restrict access to your records, this is your right, but it may affect our ability to provide you with the best possible services. Talk to us if you wish to change or cancel your consent.

### YOUR CONSENT

Your informed consent is very important to us; in signing this form you are agreeing for us to make referrals and contact other agencies with your information in order to best assist you, and also to provide National Homelessness Data Collection Agency with non identifiable information. Participation in National Homelessness Data Collection is very important to us.

Your information will be combined with information provided by other clients of this agency, and from homelessness funded agencies in Victoria and will be used to improve the homelessness services. You will not be identified in the data collection.

No report that identifies you will ever be made.

### CONFIRMATION OF CONSENT AND SERVICE DELIVERY – PLEASE TICK ✓

- I agree to provide information to Community Housing Ltd. necessary for referral purposes and for the Australian Institute of Health and Welfare
- I have received and completely understand the information provided to me about my referral /options
- I believe I have participated fully in this process (by providing my information and being part of the discussion and decision about my options)
- I understand how my privacy and confidentiality is maintained and how my information is handled
- I understand my Rights when using this service
- I understand about how to access information to make a complaint
- I agree to be contacted by Community Housing Ltd to participate in a client feedback survey by phone or by completing the feedback survey form

Signed: ..... Date: ..... / ..... / .....

Interviewer: ..... Date: ..... / ..... / .....

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