

Independent Living Services Referral

The Independent Living Referral document is created from create casework. The Referral is completed to provide information about a specific Youth to the Independent Living Provider that will be providing services for the Youth. All referrals will be emailed to ILSKIDS@dcyf.wa.gov email account for review and will then be sent to the desired provider.

Course Icons You will see some symbols appear throughout this course. These icons are used to indicate the following:

| Icon | Function |
|---|--|
|  | This will be covered in more detail later in the course. |
|  | FYI – Helpful information related to Independent Living referral. |
|  | Best Practice – This is a technique that through our experience has been shown to be the most effective and efficient. |

Objectives By the end of this module you should be able to:

- Navigate the Independent Living page
- Launch Independent Living Referral
- Complete information on Independent Living Referral Form

Creating the IL Referral

From the FamLink Desktop



Option 1

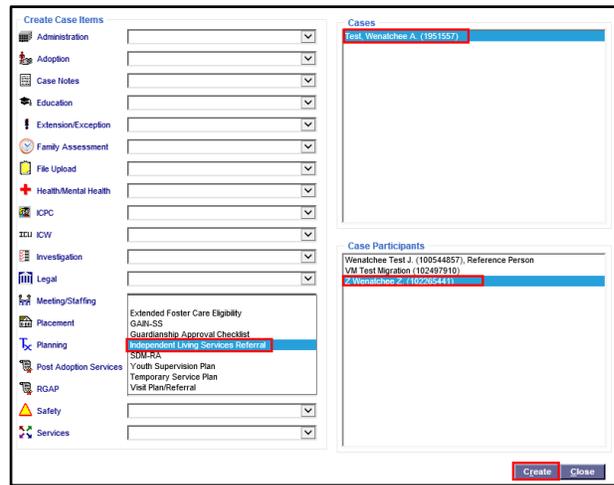
1. Select **Case Work** on Banner Bar

Option 2

1. Select **Create** on menu bar
2. Select **Case Work**

Casework Window will open

1. Select **Independent Living Services Referral** on Planning pulldown
2. In the **Cases** group box, select **case**
3. In the **Case Participants** group box, select **Participant**
4. Click **Create**



Referral Forms Window will Display

Opening the IL Referral

To populate with the desired youth name and information a search must be already been completed and a specific youth selected.



1. Click **Independent Living Services Referral** hyperlink

Independent Living Services Referral will open in Word

Complete Word Document

The Independent Living Referral document displays for completion. The information on the referral pre-populates from different pages within FamLink.

| DATE OF REFERRAL | SOCIAL WORKER | TELEPHONE NUMBER | |
|---|-----------------|------------------|----------|
| 03/12/2019 | BRADLEY, JOLENE | 3607428623 | |
| OFFICE NAME | E-MAIL ADDRESS | | |
| Head Quarters - (OB-2) | | | |
| OFFICE ADDRESS | CITY | STATE | ZIP CODE |
| 1115 P.O. Box 45710 Washington St SE, Olympia, WA 98504 | Olympia | WA | 98504 |
| YOUTH'S FULL LEGAL NAME | PREFERRED NAME | | |
| Wenatchee, Z, Z. | [Redacted] | | |

1. **Make sure all the information is correct**, including participants, names, address, school, etc. If any of the information is incorrect, correct it in FamLink and re-create the referral so the corrected information will display.
2. **Enter additional information into the Referral**, so that it is ready to send to a Provider.

 *If the date displays blank or with the date of a previous referral, you need to return to the Independent page and check Independent Living Referral check box and enter date. Then launch referral and date will be accurate.*

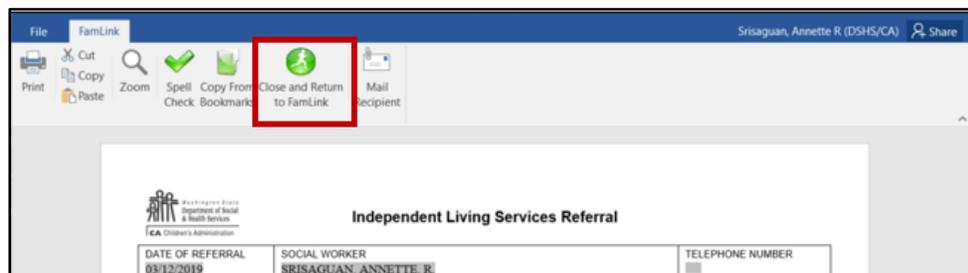
When referral has been completed and email to ILSKIDS@dcyf.wa.gov.

Emailing IL Referral



1. Click **Mail Recipient** Icon
2. **Send to** ILSKIDS@dcyf.wa.gov

Closing the IL Referral



1. Click **Close**
2. Will return to FamLink

Locate Existing Independent Living Records

From the FamLink Desktop

Option 1

1. Click **Case Expando** from Outliner
2. Click **Planning** Icon
3. Click **Independent Living** Icon
4. Select **Independent Living** or **Independent Living Services Referral** hyperlink

