

# ServicePoint Referral Network

## Receiving a Referral

**Step 1:** Log into Lake County's live ServicePoint site at <https://lakecountyil.servicept.com> using your username and password when you receive an email indicating that you have received a referral.

**Step 2:** Select the blue number on the "Outstanding Incoming Referrals" dashboard report on your home screen. Then locate and select the correct Client ID#.

**Step 3:** You will be directed to the "Client Summary Page". Scroll down to find the "Referral Network Form" there you will find the client's Cell Phone.

**Step 4:** Call the client. (Continue to Step 5, if using the Contact Log) If the client answers, continue to step 6. If the client does not answer, attempt to contact the client three times then continue to step 6.

**Step 5 (Optional):** Click "Add" underneath the Contact Log. The referral start date will automatically populate. Select your agency from the Referral Provider drop-down menu. If the client answered your call, enter today's date in "Contact Attempt #1" and "Referral Resolved". If the client does not answer, attempt to contact the client three times. Then enter the respective dates in the Contact Attempt fields. Enter the date of the final contact attempt in the "Referral Resolved" field.

**Step 6:** Locate the "Outstanding Incoming Referrals" dashboard on the client's summary page and select the pencil icon to the left of the referral to your organization.

**Step 7:** Scroll down to the Referral Data and select the appropriate "Referral Outcome" from the following options:

*Accepted = appointment scheduled*

*Accepted on wait list = will be contacted when there is capacity*

*Canceled = unable to contact client*

*If declined, please indicate reason: Ineligible or Client declined*

**Step 8:** Select the "Save & Exit" button to finish the referral acceptance process.

*Congratulations you have picked up a referral!*





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## Receiving a Referral

### Step 1:



**SERVICEpoint®**  
Connecting your community.

**Lake County, IL**

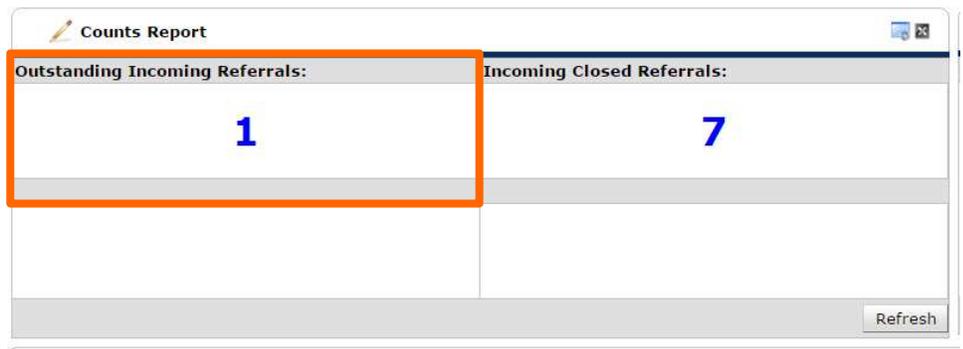
User Name   
Password

Forgot your username or password?  
Contact your agency administrator

System use requires your compliance  
with the [terms](#) and [conditions](#)

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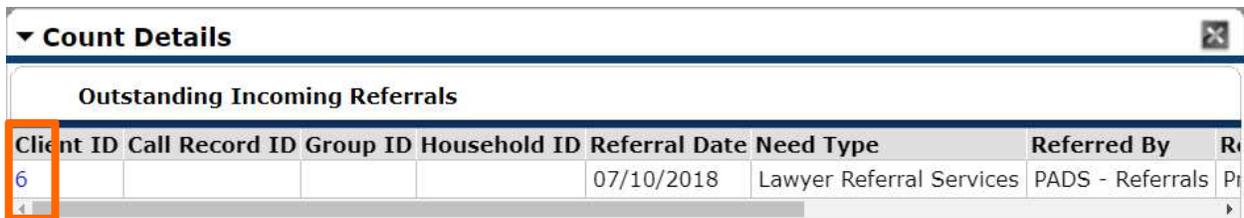
### Step 2:



**Counts Report**

Outstanding Incoming Referrals:	Incoming Closed Referrals:
<b>1</b>	<b>7</b>

### Step 3:

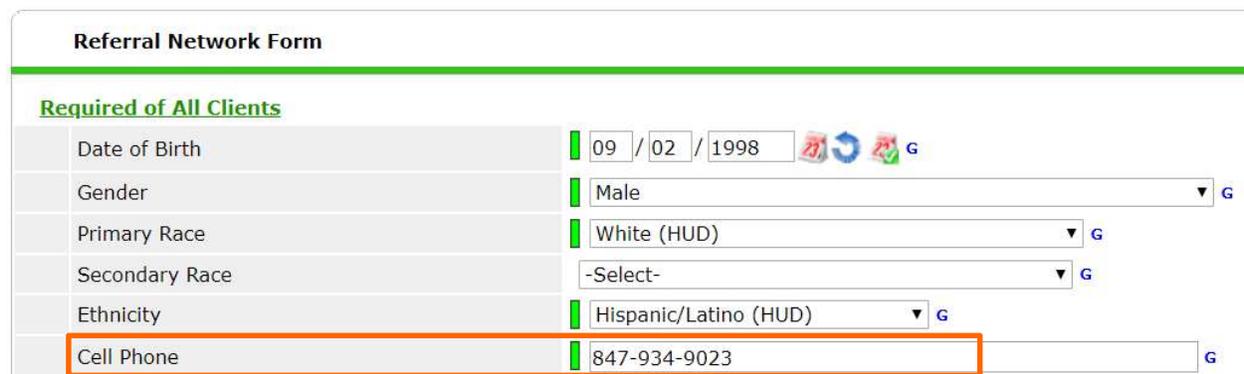


**Count Details**

**Outstanding Incoming Referrals**

Client ID	Call Record ID	Group ID	Household ID	Referral Date	Need Type	Referred By	Referred To
6				07/10/2018	Lawyer Referral Services	PADS - Referrals	Pr...

### Step 4:



**Referral Network Form**

**Required of All Clients**

Date of Birth	<input type="text" value="09 / 02 / 1998"/>	<input type="button" value="G"/>
Gender	<input type="text" value="Male"/>	<input type="button" value="G"/>
Primary Race	<input type="text" value="White (HUD)"/>	<input type="button" value="G"/>
Secondary Race	<input type="text" value="-Select-"/>	<input type="button" value="G"/>
Ethnicity	<input type="text" value="Hispanic/Latino (HUD)"/>	<input type="button" value="G"/>
Cell Phone	<input type="text" value="847-934-9023"/>	<input type="button" value="G"/>

### Step 5 (Optional):



**Optional for all Clients**

Email Address	<input type="text" value="hope@aol.com"/>	<input type="button" value="G"/>
Does this referral require a Spanish speaker?	<input type="text" value="No"/>	<input type="button" value="G"/>

**Contact Log (Referral Receivers)**

Referral Start*	Referral Provider	Contact Attempt #1	Contact Attempt #2	Contact Attempt #3	Referral Resolved
<input type="button" value="Add"/>					



**Add Recordset - (6) Rivera, Miguel**

**Contact Log (Referral Receivers)**

Referral Start \* 07 / 10 / 2018

Referral Provider -Select-

Contact Attempt #1

Contact Attempt #2

Contact Attempt #3

Referral Resolved

Save Save and Add Another Cancel

**Step 6:**

**Outstanding Incoming Referrals**

Referral Date	Referring Provider	Need Type
07/10/2018	PADS - Referrals	Lawyer Referral Services

Add Referral Showing 1-1 of 1

**Step 7:**

**Need Information**

Need General Internist Services (LV-3300,2850)

Provider Mano A Mano- Information & Referral (2393)

Date of Need 05/15/2017 09:06:01 AM

Amount if Financial No amount entered.

Notes Client notes can be added to the referral. Please note that these have open visibility.

**Referral Data**

Referred-To Provider Erie Family Health Center - Erie HealthReach Waukegan Health Center (2469)

Needs Referral Date \* 05 / 15 / 2017 9 : 06 : 01 AM

Referral Outcome -Select-

**Follow Up Information**

Projected Follow Up Date

Follow Up User Erie Family Health Center - Erie HealthReach Waukegan Health Center (2469)

**Step 8:**

Save Save & Exit Exit

