



Instructions: Specific actions are required to ensure an individual can make informed decisions about the support or care services they are seeking. The guidelines below are split into four sections representing the different engagement stages with an individual. Perform the listed actions in each section and mark “Complete.” If an instruction is not applicable, mark it accordingly before moving to the next section. These guidelines are a reminder of Connect to Care process expectations for a proper referral and handoff and are not a requirement.

| | Connect to Care | Complete | NA |
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| Initial Contact | When an individual seeking care approached me, I informed them of my reporting requirements for the following situations before they shared their presenting concern: sexual assault, harm to self/others, domestic abuse/violence, child maltreatment, and workplace violence. I informed the individual if I can maintain confidentiality or take a restricted report for one or more of the above situations. | | |
| Determine Correct Service Provider | If I was unable to maintain confidentiality for the individual’s presenting concern, I used the mandatory reporting guide to identify other options to maintain confidentiality. If the individual sought support or services for a sexual assault, sexual harassment, or family violence, I offered an in-person, virtual, or telephonic connection to the appropriate service provider. If I was not the correct service provider for the individual, I referenced the installation service provider matrix and eligibility matrix to identify the appropriate service provider. | | |
| Determine Connection Preference | After determining the correct service provider, I identified the individual’s preferred method of connection following guidance on conducting the Connect to Care Process. Before performing a connection, I explained the pros and cons to conducting the individual’s preferred method of connection and how they compare to each other. | | |
| Conduct Connect to Care Process | After I determined the individual’s connection preference, I conducted the connection. If the individual chose not to have a connection, I explained they can still seek care from the providers identified for their presenting concern. | | |