**REFERRAL FORM**

**PRIVACY NOTICE:** Anglicare Central Queensland is collecting the personal information you supply on this form for the purpose of providing a service in response to a request. Your personal details will not be disclosed to any other person or agency external to Anglicare Central Queensland without your consent unless required or authorised by law.

[ ]  **Referral Out** [ ]  **Referral In Send to:** intakementalhealth@anglicarecq.org.au

|  |  |  |
| --- | --- | --- |
| [ ]  Healthy Minds | [ ]  National Psychosocial Support | [ ]  Warm Line |
| **\*People with NDIS Plans & active Commonwealth participants are ineligible for Healthy Minds & NPS Programs**  |

**Referral sent from**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Organisation |  |
| Role |  |
| Phone number |  | Date of referral |  |
| Email |  |
| Availability for collaborative care planning for Healthy Minds and NPS | [ ]  Yes [ ]  No |

**Completed referral form to be sent to**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Organisation |  |
| Role |  |
| Phone number |  | Date of referral |  |
| Email |  |

**Participant’s details**

|  |  |
| --- | --- |
| Name |   |
| Address |  |
| Date of birth |  | Gender |  |
| Phone |  | Mobile |  |
| Consent for referral |  [ ]  Yes [ ]  No | No of children |  |
| **If under 18 Parent/Guardian details** | Name |  |
| Phone  |  | Address |  |
| Consent given by Parent / Guardian | [ ]  Yes [ ]  No |
| Cultural background | [ ]  Indigenous [ ]  TSI [ ]  CALD [ ]  Other  |
| Additional support for special needs required | [ ]  Cultural [ ]  Physical [ ]  Intellectual [ ]  Communication [ ]  OtherPlease specify:  |
| Current Diagnosis  |   | [ ]  Persistant [ ]  Episodic  |
| Current Medications |  |
| Progress Notes Plan | [ ]  Yes [ ]  No | Stable Accomdation  | [ ]  Yes [ ]  No |
| Emergancy Contacts (Minimum of 2 required for Warmline referrals) |
| Name |  | Phone  |  | Relationship to Participant |  |
| Name |  | Phone |  | Relationship to Participant |  |
| Name |  | Phone |  | Relationship to Participant |  |

**Reason for referral**

|  |
| --- |
|  |
| Co-morbidities  |  |

**Any risk factors to be considered and strategies already in place**

|  |
| --- |
|  |

**Office use only**

|  |  |  |  |
| --- | --- | --- | --- |
| Referral accepted | [ ] Yes [ ]  No  | Date |  |
| Reason for declined referral |  |
| Staff member name |  | Service and location |  |

|  |
| --- |
| **Information for Referrers**AnglicareCQ are providers of the Commonwealth-funded *National Psychosocial Support (NPS)* and *Warmline* programs and the Qld Health-commissioned Individual & Peer-Based Group Recovery programs known, locally, as *Healthy Minds.*  |
| ***National Psychosocial Program (NPS)*** Referral Pathway:For participants who satisfy eligibility criteria including but not limited to: * Self-referral, friend or family,
* Allied Health/Mental Health professionals,
* Alcohol & Other Drug services,
* Qld Police,
* General Practitioners,
* PHN funded clinical MH services.

Eligibility Criteria:* Severe mental illness OR at risk of suicide
* Reduced psychosocial functional capacity.
* Aged 18-65.
* Not assisted by/not eligible for entry to the NDIS and/or not eligible for NDIS entry.
* Not a participant of existing community mental health programs

Service Provision:Time limited (6 – 9 months) psychosocial support services focused on: * Building capacity,
* Individual and group-based support,
* Achieving individual recovery goals.

***Healthy Minds*** Referral for participants who satisfy eligibility criteria is through either the Central Queensland or Central West Hospital & Health Service.Eligibility Criteria:* Severe mental illness either episodic or persistent.
* Individuals over 18yrs of age.
* Accessing or has recently accessed mental health clinical care through a Hospital & Health Service
* Not assisted by the NDIS.

Service Provision:Over a 12-month period providing non-clinical, psychosocial support (individual & group-based), supporting people to achieve their recovery goals. * Individual supports,
* Individual & group peer work.
 | ***Group-Based Recovery Supports***Entry to groups is by Internal referral ONLY and as determined by the individual as identified in their individual recovery plan.Eligibility Criteria:Active participant in the NPS or Healthy Minds programs.Service Provision:Program participants can access a range of group-based activities which focus on capacity building and skills training. Examples include:* Social Inclusion,
* Creative Expression,
* Mindfulness & Movement,
* Dialectical Behaviour Skills.

***Warmline***Referral Pathway:For participants who satisfy eligibility criteria, including but not limited to.* Self-referral, friend or family,
* Allied Health/Mental Health professionals,
* Alcohol & Other Drug services,
* Qld Police/ Emergency services
* General Practitioners.

Eligibility Criteria:* Individuals who have suicide ideation.
* Individuals who have attempted suicide.

Service Provision:Telephone-based service offering:* Conversational checklist
* Distress support
* Safety plan review
* Emergency response to suicide risk status

Further information Contact the Intake Team:T: 1300 769 814 E: intakementalhealth@anglicarecq.org.au |