



PAANTHI – MENTAL HEALTH COUNSELLING REFERRAL FORM

CLIENT PERSONAL INFORMATION

Given Name: _____ Surname: _____

Preferred Name: _____ Date of Birth: ____/____/____

(If different from given name)

Gender Identity: Male Female Other: _____

Please tick: Aboriginal Torres Strait Islander Aboriginal & Torres Strait Islander

Non-Aboriginal Member of Aboriginal family

Language Group (if known): _____

Address: _____

Suburb/Town: _____ Post Code: _____

Telephone: *(Best contact)* _____ Telephone: *(Other)* _____

COUNSELLING PREFERENCE (please note this is not always guaranteed, tick as many boxes as needed):

Male Female

South City North

Face -to-face By phone

REFERRER INFORMATION

Referral Type: Self-Referral Family/Carer Worker

Referrer contact details *(if not self)* Name: _____

Phone: _____ Email: _____

Relationship/Role: _____

Has the client consented to this referral? Yes No

Do you want updates about this referral? Yes No

ADDITIONAL CARER, SERVICES, AND SUPPORT DETAILS

Name: _____ Are you currently registered or receiving:

Role/Agency: _____ NDIS Yes No

Contact: _____ DSP Yes No

REFERRAL REASON

Please provide a brief description explaining why you are accessing our service, as well as completing below:

ADDITIONAL IMPORTANT INFORMATION

Social History (*Family, Marital, Housing etc*)

Drug and Alcohol History (*if any*)

Employment/Study History (*if any*)

Medication and Medical History (*if any*)

Psychiatric History (*previous episodes, previous diagnosis, admissions, orders etc*)

Risk Assessment

To self: None Low Moderate Significant Extreme

To others: None Low Moderate Significant Extreme

Please sign and date to consent to having the details on this form stored in Nunkuwarrin Yunti's client information system, and the referral discussed with the referrer.

Signature:

Date:

IN AN EMERGENCY PLEASE CALL 000 OR THE MENTAL HEALTH TRIAGE SERVICE ON 13 14 65

Please fax this Form to: 08 8384 8228

If you are unable to fax, please email referral to paanthiadmin@nunku.org.au

Phone Enquiries: 8392 3500