Palmerston

Standard on Culturally Secure Practice

FORM 59 – REFERRAL FORM

Albany
E: albany@palmerston.org.au
Fax: 9892 2199

Katanning
E: katanning@palmerston.org.au
Fax: 9821 8309

Perth
E: perth@palmerston.org.au
Fax: 9419 3959

REFERRER DETAILS

Date of Referral: _____Contact Person: _____
Agency: _____ Email:_____
Phone: _____ Fax: _____ Mobile: _____

CLIENT DETAILS

Name: _____ D.O.B: _____ Age:_____Gender:_____
Address: _____ Postcode: _____
Phone: _____Mobile: _____ Email: _____
Best time to call:_____ Preferred Contact Method: _____
Permission to leave a voice and / or text message: Yes ❒ No ❒
Aboriginal and/or Torres Strait Islander: Yes ❒ No ❒

GP Details: _____

REASON(S) FOR REFERRAL

CURRENT DRUG USE

Drug of Concern	Amount/Frequency	Duration	Date Last Used

ANY OTHER RELEVANT ALCOHOL and/or OTHER DRUG USE HISTORY, INCLUDING TREATMENT

CURRENT PHYSICAL/MENTAL HEALTH PROBLEM(S) and PRESCRIBED MEDICATION(S)

ANY FAMILY, SIGNIFICANT OTHERS OR CHILDREN INVOLVED?

OFFENCE & RELATIONSHIP TO ALCOHOL and/or OTHER DRUG USE (if applicable)

OTHER ISSUES OF CONCERN

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Currently pregnant:	❒ Yes	❒ No	Deliberate self-harm/behavior:	❒ Yes	❒ No
Positive for BBV:	❒ Yes	❒ No	Currently lives alone:	❒ Yes	❒ No
History unsafe injecting practice:	❒ Yes	❒ No	History of aggression/violence:	❒ Yes	❒ No
Current suicidal ideation:	❒ Yes	❒ No			

PREFERRED SUPPORT REQUESTED

Individual counseling:	❒ Yes	Family counselling:	❒ Yes
Couple counselling:	❒ Yes	Group/ BIG counselling:	❒ Yes
Single session counselling:	❒ Yes	Residential Rehabilitation:	❒ Yes

GOALS FOR COUNSELLING

ADDITIONAL RELEVANT INFORMATION

(Please attach any further information/details that may be relevant to this referral)

Has the client consented to this referral to Palmerston? ❒ Yes
Please note: Palmerston will not act on referrals without client consent

Signature of referrer: _____Signature of client:_____

(not essential but preferred)

PALMERSTON USE ONLY

Contacted by:_____ Date:_____

Appointment date:_____ Time:_____

Counsellor:_____

Referrer advised of outcome: ❒ Yes ❒ No