

Links to Wellbeing Provisional Referral Form

Referrer details

Date of referral			
Referrer Name		Phone	
Email			
Organisation		Position	

Client details

Full name			Date of Birth	
Aboriginal and/or Torres Strait Islander	Yes	No	Gender	
Main language spoken				
Interpreter required	Yes	No	Language	
Next of Kin			Relationship	
Next of Kin Contact Details				

Risk assessment

Suicide risk	
Thoughts of harm towards others	

Referral information

Main presenting issues	
Goals and expected outcomes	
Other agencies involved	

Consent to refer

As the referrer, I have discussed the proposed referral with the client and I am satisfied that they understand the proposed uses and disclosures of the information contained in the Referral Form and agree to this information being given to Links to Wellbeing.

I understand that I can request a copy of this document once completed and that Links to Wellbeing will store the information provided electronically.

Signed	Date
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Submit the referral

Please fax the completed referral to Central Referral Unit on 1300 580 249

About Links to Wellbeing

Links to Wellbeing is a government funded partnership between [Neami National](#), [Mind Australia](#), [Skylight Mental Health](#) and [Uniting Care Wesley Bowden](#). This service is supported by [Adelaide PHN](#).

