

SWSPHN Mental Health Central Intake

Enquiries 1300 797 746 (1300 SWSPHN) Referrals confidential fax line 4623 1796



Provisional (non-GP) Referral Form <i>(For PHN Approved Referrers Only)</i>		
Referrals cannot be accepted without a brief summary of mental health concerns (Section 3) and the consumer's signed consent (Section 4.1) and additional consent for young people (Section 4.2)		
1. Referrer Details		
Date:	Name:	Organisation:
Phone: Fax:	Position in organisation:	Suburb:
Relationship to consumer:		Email:
2. Consumer Details		
Title:	First Name:	Last Name:
Address:		Postcode:
Phone: H:	DOB:	Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
M:	Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both <input type="checkbox"/> Neither <input type="checkbox"/>	
Country of Birth:	Language spoken at home (other than English): Interpreter required?	
Current General Practitioner (GP):		
Name:	Practice:	Phone:
3. Mental Health Concerns		
Past/Present diagnosis of mental health condition, if any:		
How often does the consumer experience mental health issues (eg. Often throughout the day/once a day/weekly etc):		
Does the consumer's mental health impact on their everyday life? (eg. Social, personal or work life)		
Has the consumer received support by a Mental Health Professional in the past? If so, how recent was this support?		
Does the consumer currently take medication or has taken medication in the past?		

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Services by Stepped Model of Care

(Please tick required service)

Low Intensity <input type="checkbox"/>	
Medium Intensity <input type="checkbox"/>	
Severe and Complex <input type="checkbox"/>	Credentialed Mental Health Nurse Service

Other services available within stepped care model that **require an alternative Referral:**



Clinical Suicide Prevention Service

Priority access to services for people who have attempted suicide or have suicidal ideation of low to medium risk. Please refer to your GP.



Young people 12-25
Variable Intensity
headspace centres in
Liverpool, Bankstown
and Campbelltown

headspace provides mental health services to young people aged 12-25 by connecting young people to services to assist with physical health, mental health, education and employment and alcohol and other drug services. (For more information call: Bankstown 9393 9669 / Campbelltown 4627 9089 / Liverpool 8785 3200.)

NOTE: More information about services can be found at swsphn.com.au (Mental Health Programs section).

4.1 Consent

I, _____, (consumer, parent/carer or guardian name - please print clearly)

Consent to this referral and I agree to information about my mental health being recorded in my medical file and shared between the GP, South Western Sydney PHN Central Intake to assist in the management of my health care and the Mental Health Professional to whom I am referred.

I understand that SWSPHN will provide information that does not identify me, such as the types of service I receive, to the Department of Health to assist improvement of mental health services in Australia. (Delete if you do not consent to sharing of information with the Department of Health)

4.2 Additional Consent for young people attending school

I _____ (parent/carer or guardian) consent to information relating to my child/guardian, concerning their safety, welfare or wellbeing, being shared with the school, as is permitted with the Children and Young Persons (Care and Protection) Amendment 2016.

Our Mental Health Central Intake clinicians are happy to answer your questions regarding referral and treatment planning on **1300 797 746** (1300 SWS PHN)

Fax completed form with signed consumer consent to
mental health central intake confidential fax line **4623 1796**