

# Referral Form – Mind Care 360 Health + Community



## Referral Pathway – Please Select Suitable Service

### Mind Care – Attach Mental Health Care Plan

- ATAPS – Tier 1 - Health care card holder presenting with mild to moderate psychological issues.
- ATAPS – Tier 2 – Children aged 12yrs & under, perinatal depression, homeless, ATSI & CALD patients presenting with mild to moderate psychological issues.
- Mental Health Services Rural and Remote
- Better Access - Medicare

### Suicide Prevention

- Patient is experiencing suicidal ideation or self harming behaviour (not in crisis or emergency)
- ALIVE – Patient is presenting with moderate to high risk suicide/self harm factors (North metro area only).

Patient Details		
Patient Name:	D.O.B:	
Patient Address:		
Home Phone:	Mobile:	Date of Referral:
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Other:	Interpreter required: Yes <input type="checkbox"/> No <input type="checkbox"/>	Language:
Aboriginal <input type="checkbox"/>	Torres Strait Islander <input type="checkbox"/>	Both Aboriginal & Torres Strait Islander <input type="checkbox"/>
Medicare No:	Health Care Card: Yes <input type="checkbox"/> No <input type="checkbox"/>	HCC No:
Parent/Guardian Name (if under 16) or NoK:		Phone:
Prior mental health care: Yes <input type="checkbox"/> No <input type="checkbox"/>	Has the patient's Mental Health Care Plan been billed? Yes <input type="checkbox"/> No <input type="checkbox"/>	

## GP / Referrer Details

Name:	Phone:
Address:	Practice/Organisation:

## Mental Health Diagnosis

- Alcohol/drug use
- Psychotic Disorder
- Depression
- Unexplained Somatic Disorder
- Anxiety
- Childhood behavioral disorder
- Other:

## Psychological Strategy

- Focused Psychological Strategies
- Psychological Therapies
- Individual Therapy
- Group Therapy

## Current Psychotropic Medications

- Mood Stabilizers
- Anti-psychotic & Tranquilizers
- Antidepressants
- Benzodiazepines & Anxiolytics

## Outcome Tool

- DASS 42
- DASS 21
- K10
- SDQ
- Score:

- I consent to 360 Health + Community discussing my referral with partner agencies if appropriate.

## Patient Signature: