

Referral Guidelines

About headspace Goulburn

headspace Goulburn is a free, youth-friendly and confidential service for young people aged 12 – 25 years. Led by Grand Pacific Health, **headspace** Goulburn, brings together a range of services, to provide a holistic “one-stop-shop” for young people. We offer information, intake, assessment support and referral. **At headspace Goulburn** we offer the following supports and services including:

- Mental Health Support – Youth Counsellors, Youth Workers and other Mental Health Professionals
- Drug and Alcohol Support
- Education and Employment Support
- Physical Health and Sexual Health Support (watch this space)

PLEASE NOTE:

headspace Goulburn is not an acute mental health/crisis service. If you have any immediate concerns regarding the safety/wellbeing of a young person, please call: Mental Health Line 1800 011 511; Lifeline on 13 11 14; or Kids Helpline on 1800 55 1800. In an emergency, contact 000 immediately.

HOW TO REFER:

Self-Referral

Young people are encouraged to make contact with the headspace Goulburn service directly.

By phone/email

Call (02) 4824 4944 within office hours or email info@headspacegoulburn.org.au, a worker will contact the young person to make a phone intake appointment within 1-3 days.

Drop in

Young people can call into **headspace** Goulburn, 13-17 Verner Street, Goulburn, between 9am and 5pm, Monday – Friday. Staff will endeavour to see the young person the same day or the next available appointment will be offered.

Professional Referral

GP's, Allied Health Professionals, community-based agencies and educational institutions can all refer young people to **headspace** Goulburn using the Service Providers Referral Form. General Practitioners should include a mental health care plan (if appropriate) for the young person and attach this to the **headspace** Goulburn referral form.

Family Referral

Families, carers or friends can refer a young person to **headspace** Goulburn. The young person needs to be aware of and consent to the referral and be willing to meet with a member from the **headspace** Goulburn team. Once receipt of referral has been confirmed, a worker will contact the young person within one to three working days to make an appointment. Families, parents or carers who have a young person engaged with **headspace** Goulburn can also access our centre to discuss service provision.

Service access information:

Do you have an existing GP? Yes No

Who: _____

Are you linked with any other services? Yes No

Do you have an existing counsellor? Yes No

Do you have an existing Mental Health Treatment Plan? Yes No

Risk:Have you deliberately harmed yourself? Yes NoHave you been admitted to the hospital in the last 30 days for Mental Health? Yes NoHave you thought of ending your life? Yes No**Referrer's details:** Has the young person consented to this referral being made? If the young person is under the age of 14, have the person's parents or carers given consent?

Name: _____

Organisation: _____

Relationship to Client: _____

Postal Address: _____

Phone Number: _____

Email Address: _____

*Please Note; we will continue to liaise with the client from this point, unless consent is provided from the client.

How to submit this form:

In Person: 13-17 Verner Street, Goulburn, NSW, 2580

Phone: (02) 4824 4944

Fax: (02) 4824 4994

Email: info@headspacegoulburn.org.au

Mail: PO Box 322, Goulburn, NSW, 2580

Please note: This service is not a crisis service.**For any immediate concerns please call Mental Health Line on 1800 011 511****This is a 24 hour telephone service.**

Office Use Only: Referral Entered Referral Scanned Client Allocated & Date: _____