

# **HealthWISE Mental Health Referral Form**

This service is supported by the Australian Government Department of Health via the Hunter New England Central Coast Primary Health Care network to provide treatment to people who are experiencing **mild to moderate mental disorder**. HealthWISE mental health services are targeted to those individuals requiring primary mental health care who are unable to access Medicare subsidised mental health services such as Better Outcomes

Referrals must include a GP Mental Health Treatment Plan sent to HealthWISE before sessions can commence.

#### **Client Details**

**Name** << Patient Demographics: Full Name>> **DOB** << Patient Demographics: DOB>> **Gender** << Patient Demographics: Sex>>

Address << Patient Demographics: Address >>

**Phone** << Patient Demographics: Phone (Home) >> **(mob)** << Patient Demographics: Phone (Mobile) >> **email** << Patient Demographics: E-mail> >

Parents / Guardian Names (if client is under 18 years of age) << Parent / Guardian Names (if under 18)>>

Pension/Health Care Card? << Pension / Health Care Card?>> Aboriginal/Torres Strait Islander? << Aboriginal / Torres Strait Islander?>>

**REFERRING GP** <<Doctor:Name>> **Date** <<Miscellaneous:Date>>

**Address** << Doctor:Full Address>> **Phone** << Doctor:Phone>>

Fax Number << Doctor: Fax>> Provider Number << Doctor: Provider Number>>

Patient has consented to this referral <- Patient has consented to this referral?>> Consented to be contacted via text/email message <- Consented to be contacted via email/text message>>

### **Service Required**

**Initial session's** << Initial Sessions>> **Additional sessions** << Additional Sessions>> with (Mental Health Clinician) << Addressee: Name>>

Has the client accessed a Mental Health Care Program previously? <- Has client accessed a mental health prog before?>> Year <- Year>>

Service/Mental Health Clinician << Service / Mental Health Clinician>>

Clients who have completed ten sessions or more of individual services under Better Access in a calendar year should not be referred to HealthWISE Mental Health Programs during the remainder of that year.

For more information regarding Program Guidelines:

http://www.health.gov.au/internet/main/publishing.nsf/content/mental-pmhcsa-guidelines



**HealthWISE provides services in the following towns:** Tenterfield, Inverell, Glen Innes, Guyra, Armidale, Walcha, Quirindi, Tamworth, Werris Creek, Manilla, Barraba, Mungindi, Moree, Wee Waa, Narrabri, Boggabri, Gunnedah, Warialda, and Bingara.

## **PLEASE FAX REFERRAL TO**

**HealthWISE Coordinated Referral Network - FAX 1300 452059** 

## FOR MORE INFORMATION