

**Drug & Alcohol Recovery** 

# WINDANA FAMILY PROGRAM REFERRAL FORM

Windana Family Program is a flexible support program for parents or carer's of children where there is a substance use issue. It combines an understanding for alcohol and other drugs with a commitment to assisting clients to strengthen their parenting capacity.

### **Brief Intervention**

Family Program offers information, advocacy, advice and referral for clients on a short term basis (3-4 visits).

#### **Ongoing support**

Families have children in their care fulltime or actively working towards reunification and require support.

#### Has client given consent for the:

following information to be given to Windana Family Program

(Tick if yes)

• referral to be made to Windana Family Program

(Tick if yes)

Client Name			
DOB and CIMS			
Address			
Phone	Mobile:	Home:	
Emergency Contact	Name:	Relationship:	
	Phone Number:		
Preferred contact method	Phone:	SMS:	
	Email:		

Name of referrer	Date:
Referring Program	
Email	
Phone	

Indigenous/CALD status: (please tick)				
Aboriginal but not TSI origin		TSI but not Aboriginal origin		
Both aboriginal and TSI origin		Neither Aboriginal nor TSI origin $\Box$		
Not stated/indequtely described		CALD/ESL/Interprer required		

Names of children	DOB and age of children	Biological parent of children	Access/contact issues
Who are the children residing with? (include contact details)			
Who lives in your household?			

What parenting support is required and why?

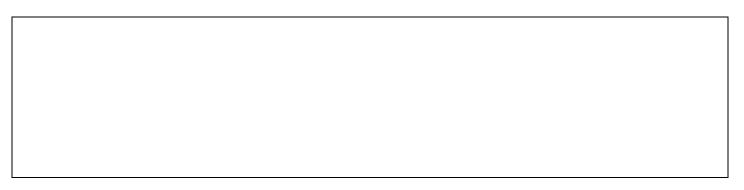
GP name and contact	
details	

## Please give details regarding:

Other family or	Program:
Community service	
program involved	Contact:
Other supports client	
currently has.	
Current Legal Issues	
ie Child Protection,	
Family Court, IVO's or	
Criminal Matters	
Current or past	
substance use	
(including	
pharmacotherapy)	
Identified mental	Diagnosis:
health diagnosis and	Service:
support services	Contact:
Employment/	
Current Study	

## What is the client's view of the referral?

## Please give other relevant details of the family situation:



Are there any worker or client safety issues:

🗆 No

If yes, please explain: