

REFERRAL FORM

**Brent, Wandsworth, and Westminster MIND
Mental Health Hub Service Referral Form**

If you have any queries before making a referral or wish to discuss a recent referral,
please call: 07771 294 296

Or email: mentalhealthhub@bwwmind.org.uk

INFORMATION about the person being referred											
Surname:		Forename:									
Ethnicity:		Nationality: Religion:									
Date of birth		Name of GP and telephone number									
Gender/identity		Pronouns:									
First Language:		Interpreter needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
Address:		Postcode:									
Telephone number.		Name of the person making the referral and contact details									
<p style="color: red; margin: 0;">Please supply details for the parent/carer/guardian.</p> <p style="color: red; margin: 0;">Note: Contact will only be made in an emergency or to discuss referral if under 16 years of age.</p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30%; padding: 2px;">Name</td><td></td></tr> <tr><td style="padding: 2px;">Relationship</td><td></td></tr> <tr><td style="padding: 2px;">Phone</td><td></td></tr> <tr><td style="padding: 2px;">Email</td><td></td></tr> </table>	Name		Relationship		Phone		Email		
Name											
Relationship											
Phone											
Email											
<p>If the CYP is under 17 years old, are they currently involved or have been involved with CAMHS or other mental health services? Please tick as appropriate: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know</p> <p>If you answered yes, what is the name of the service and the reason for involvement?</p> <hr style="border: 0.5px solid black;"/>											
<p>Is the CYP currently or about to be referred to CAMHS? Please tick as appropriate: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know</p>											

Referrals must be returned to mentalhealthhub@bwwmind.org.uk

PARENTAL CONSENT FORM

(This must be completed if the young person is under 16 years old – continues overleaf)

N.B For children and young people aged between 13 and 16 years, consent must be obtained from both the child/young person and parent/carer/guardian.

Consent – if this section is not completed fully, the referral will be returned to you prior to triage.		
Consent for referral		
Do the parents/carer/guardians (who have parental responsibility) consent to this referral to Mind if the young person is under 16 years old?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Consent for data processing		
In order to provide this service, Mind in Brent, Wandsworth and Westminster (BWW) will need to process data relating to the child/young person, as well as their parent/carer. Do you consent to this? (N.B: this person must have legal parental responsibility for the child/young person).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Consent for data sharing		
<p>Information you share with us is confidential between you, our service, and your GP. The only time we will break this confidentiality is if we are concerned that there is a serious risk of harm to you or someone else. We store information in our Database system. This is confidential and cannot be accessed by anyone outside of our service. We share anonymous information with NHS England and other statutory bodies that monitor our performance. This information may include details on the number of people we see, what type of treatment they receive, or if they recovered. This does not include your name, address, contact details etc. You have the right to opt out of your confidential patient information being used by the NHS.</p> <p>If you wish to opt-out please visit the following website: https://www.nhs.uk/your-nhs-data-matters/. Alternatively, you can call 0300 303 5678.</p>		
<p>Services with which data may be shared:</p> <ul style="list-style-type: none"> A service the client is already accessing / due to access / has recently accessed. A new service (referral) that would benefit the client (<i>The client requires a different service from what is being offered by BWW Mind</i>) NHS England’s Mental Health Services Data Set <i>This is a national data set which collects data on all clients in England receiving emotional well-being and mental health services through NHS-funded interventions.</i> 		
I agree to give my consent for Brent, Wandsworth and Westminster Mind to use my anonymised feedback on the following:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> Use on printed annual reports, leaflets, or any publicity material, & in events/exhibitions On the charity’s websites Share with commissioning agencies 		
<p>Name of person making the referral: _____</p> <p>Email address (will be used as a signature): _____</p> <p>Date: _____</p>		
<p>Note: If the young person is 16 and over, we may need to speak to them about the referral and can be difficult when they are working or in school, please provide a suitable time to contact them during 9 am- 5. pm at _____ or between _____ And _____</p>		

YOUNG PERSON CONSENT FORM

(Required if the young person is under 16 years old)

N.B For children and young people aged between 13 and 16 years, consent must be obtained from both the child/young person and parent/carer/guardian.

Consent – if this section is not completed fully, the referral will be returned to you prior to triage.

Consent for referral

Does the young person, parent, or guardian consent to this referral	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If the young person is 16 years and over , does the young person consent to this referral being shared with their parents/carer/guardians?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Consent for data processing

In order to provide this service, Mind in Brent, Wandsworth and Westminster (BWW) will need to process data relating to the child / young person. Does the young person consent to this?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Consent for data sharing

Information you share with us is confidential between you, our service and your GP. The only time we will break this confidentiality is if we are concerned that there is a serious risk of harm to you or someone else. We store information in our Database system. This is confidential and cannot be accessed by anyone outside of our service. We share anonymous information with NHS England and other statutory bodies that monitor our performance. This information may include details on the number of people we see, what type of treatment they receive, or if they recovered. This does not include your name, address, contact details etc. You have the right to opt-out of your confidential patient information being used by the NHS.

If you wish to opt-out please visit the following website: <https://www.nhs.uk/your-nhs-data-matters/> Alternatively, you can call 0300 303 5678 to opt-out.

Services with which data may be shared:

- A service that the client is already accessing / due to access / has recently accessed.
- A new service (referral) that would benefit the client (*The client requires a different service from what is being offered by BWW Mind*)
- NHS England's Mental Health Services Data Set

This is a national data set, which collects data on all clients in England receiving emotional wellbeing and mental health services through NHS-funded interventions.

I agree to give my consent for Brent, Wandsworth and Westminster Mind to use my anonymised feedback on the following:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> • Use on printed annual reports, leaflets, or any publicity material, & in events/exhibitions • On the charity's websites • Share with commissioning agencies 		

Name of person making the referral: _____

Email address (will be used as a signature): _____

Date: _____

What does our service provide?

We provide a number of professionals in our Mental Health Hub that support children and young people (11-25 years old) to address their mental health issues early on.

The service is free and includes a wide range of psychoeducational workshops available to children and young people (CYP) and their parents, carers, and staff. Mental Health Hub accepts referrals from local schools, youth groups, Doctors, school staff, and children and young people who can self-refer to any of our art, music, and theme-focused workshops such as building confidence and improving low self-esteem.

We offer short-term interventions, psycho-education, workshops, extracurricular activities, and 1:1 guided self-help for children and young people experiencing common mental health problems and issues. We ensure that the type of help offered best matches the person's needs.

- Guided self-help includes one-to-one support weekly or via guided self-help workshops.
- Through a team of qualified clinicians we deliver weekly one-to-one sessions with children and young people, psycho-educational workshops, Guided Self-help (based on cognitive behavioural therapy (CBT) or other treatments like psychotherapy.

Who do we support?

We support children and young people between the ages of 11 and 25 years old who can benefit from practical, self-guided help and evidence-based solutions for the treatment of common mental health conditions, such as anxiety and low mood.

We provide support to individuals experiencing:

- Finding it hard to control worrying
- Anxious in social situations
- Exam stress
- Bullying
- Difficulty making and keeping friends
- Anger
- Low self-esteem and confidence
- Loneliness and isolation
- Sleep difficulties
- Eating well and staying well
- Experiencing anxiety, stress, and low mood.

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Our exclusion criteria

- Those who are high risk and seeking immediate crisis support (i.e. feel that they cannot keep themselves safe).
- Diagnosed severe and complex mental health disorders.
- Those who are seeking assessment and specific treatment for Autism Spectrum Disorder or ADHD
- Those who are seeking support from a psychiatrist for a psychiatric assessment or medication management
- Those who are seeking and already accessing support from another mental health service (except BWWMIND mental health services).