

# FamilyMatters

exploring better ways of getting on together

Family Matters  
46-48 Devonport Road  
Stoke  
Plymouth PL3 4DH

Tel: 01752 606826

Email: [familymatters@nhs.net](mailto:familymatters@nhs.net)

## Referral Form

To avoid delay please complete all sections

<b><u>Family Details</u></b>		
Family Name(s)	Responsible Adult	
Address	Postcode	
Tel No(s)	Email address	
Who lives at home?	Name	DOB
Please list any other key family members or friends who are involved		
<b><u>GP Details</u></b>		
Name of GP	Name of Surgery	
Referrer Details OR If a Self-referral please go straight to signature and date		
Name	Title/Position	
Address		
Tel No	Email address	
<b>Signature</b>	Date	

**Concerns and reasons behind this referral**

**Hopes for the future**

**What is going well just now?**

**Whose idea was this referral? (Please delete as appropriate)**  
[The Family                      The Referrer                      Both of You                      Someone else ]

**Are there any current or past child protection issues or risks?**  
**Expand as necessary**

**Are there any current or past domestic abuse issues or risks?**  
**Expand as necessary**

**Are there any current or past mental health issues or risks?**  
**Expand as necessary**

**Other agencies currently involved**

**It is the referrer's responsibility to inform relevant others of this referral**

We will use your information to be able to contact you and to be able to assess how best we can provide your family with the appropriate service.

I consent to you using my information to process my referral and for you to contact other agencies whose details I have provided above to gain further information if required.

Signature \_\_\_\_\_ Date: \_\_\_\_\_