|  |  |
| --- | --- |
| **Date** |  |
| **Referrer on behalf of the young person and family** |
| **Name** | **Agency** | **Role** | **Contact details** |
|  |  |  |  |

**Family Composition and Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Names of parents/carers****Parents/carers first language****Parents/carers ethnicity****Parental Responsibility****Contact Number****Primary Address** |  | **Names of parents/carers****Parents/carers first language****Parents/carers ethnicity****Parental Responsibility****Contact Number****Primary Address** |  |
| **Child’s name****Date of birth****Child’s first language****Child’s ethnicity****Contact Number****Primary Address** |  | **Child’s name****Date of birth****Child’s first language****Child’s ethnicity****Contact Number****Primary Address** |  |
| **Child’s name****Date of birth****Child’s first language****Child’s ethnicity****Contact Number****Primary Address** |  | **Child’s name****Date of birth****Child’s first language****Child’s ethnicity****Contact Number****Primary Address** |  |

|  |
| --- |
| **Current Summary** |
| Brief narrative summary of this child / young person, family and their current circumstances:(include any potential risks and concerns): |  |
| Reason for the current referral |  |

|  |  |
| --- | --- |
| **Previous Agency Intervention** | **Current Agency Intervention** |
| Name(s) and Contact information  | Name(s) and Contact information  |
| Services Provided  | Services Provided  |

|  |
| --- |
| **Safety, Wellbeing and Belonging Domains** |
| ***Domain*** | ***What Is Working Well*** | ***What We Need to Know*** |
| Physical Health |  |  |
| Emotional / Psychological Health |  |  |
| Relationships |  |  |
| Family/individual Strengths  |  |  |
| Education and Personal growth |  |  |
| Community connections  |  |  |
| Culture |  |  |
| Life skills |  |  |
| ***Need / Behaviour*** |
| Detail Specific behaviours which had led to the referral: |

**Privacy and Confidentiality**

YCSS adheres to the Australian Privacy Principles as outline below. Further information about the APPs can be found on the following link

<https://www.oaic.gov.au/individuals/privacy-fact-sheets/general/privacy-fact-sheet-17-australian-privacy-principles>

I understand my information will be stored in line with the Privacy and Data Protection Act 2014 and in line with YCSS Policies and procedures. YCSS is a licensed Human Services Organisation and is regulated under the Human Services Quality Framework.

|  |  |
| --- | --- |
| **Signed** (referrer): | **Date:** |