**INITIAL REFERRAL FORM - ADULTS**

Please complete and return to us either by:

 **01723 850155**

* E-mail as an attachment to staff@carersresource.net or
* Post to Scarborough and Ryedale Carers Resource, 96 High Street, Snainton Scarborough, YO13 9AJ
* Telephone for enquiries: 01723 850155

 **REFERRER DETAILS:**

|  |  |  |
| --- | --- | --- |
| **Name:****Organisation:****Job Title:****Phone no:****Email:** | **Date of Referral:** | **Consent gained from client for this referral & for SRCR to contact the client:** **YES** |
| **CLIENT DETAILS:**  |
| **Name:** **Date of Birth:** **Ethnic Origin:** | **Address;****Phone no:** **Email:** |
| **GP Surgery:** | **Any Health Conditions:** |
| **Any additional information relevant to us making contact with client:** |
| **IMPORTANT: Any Safeguarding / risk / other concerns you feel we should be aware of before visiting at home?**  |
| **Details of Service Required -** Please tick service required |
|  **Carers Support** (18 + yrs old)(Any referrals for Young Carers 8–17 yrs old please complete our Under 18s Referral Form) | An unpaid family carer is someone who looks after a member of their family or a friend who is ill, frail or disabled; this includes mental health & substance misuse. We look at reducing the impact of care - we cannot take away the caring responsibilities or provide personal care, but we can work with the carer to improve their well-being & help to reduce the pressure/challenges of their caring role. |
|  **My Neighbourhood**(loneliness & isolation) | My Neighbourhood service is designed to offer individual support, to reduce the impact of isolation & loneliness by helping individuals to re/engage in their local community &/or find ways to improve their mental, social & physical well-being. |
|  **Home from Hospital**(discharge to 10day tolerance) | Home from Hospital Service supports adults discharged from hospital who need a little additional support to make a confident & comfortable return home. The support offered is very practical & can work alongside other care packages. |
| **Please explain the client’s current situation, what you require from Carers Resource & any relevant details regarding the client (continue on next page if necessary):** |