

## Service Provider Referral Form

### Referral Details

#### Client Details

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:

- Female  
 Male  
 Not stated/not known/inadequately described  
 Transgender (Male to Female)  
 Transgender (Female to Male)

Indigenous Status:

- Aboriginal  
 Torres Strait Islander  
 Both Aboriginal and Torres Strait Islander Origin  
 Neither Aboriginal nor Torres Strait Islander Origin  
 Not Stated/Unknown

Does the client identify with being in the LGBTIQAP+ community? Yes  No

Is the client of cultural or linguistically diverse background? Yes  No

Is there a need for language/interpretation services? Yes  No

Parent/Guardian Details (if a minor)

Name: \_\_\_\_\_

Contact Details: Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Mobile: \_\_\_\_\_

#### Client Consent

The client consents to being contacted by a Lives Lived Well staff member

Date consent was obtained: \_\_\_\_\_

**Please note: this section is mandatory**

#### Client Contact Details

Preferred method of contact: Phone  Mobile  Email

Phone

Mobile

Email

Address

Suburb/Town

Postcode

#### Client Circumstances

Reason for Referral

Primary Drug of Concern

Does the client have a co-existing mental health issue? Yes  No

Is the client on a waitlist for another service? Yes  No

History of current substance use

Other Information - Risks (i.e. any issues that may pose a risk to the client or LLW staff), Medical, Family Support, Housing, Case Management etc.

**Referred by:**

Name

Address

Contact: Phone: Fax:

Email:

Provider Type/Agency:

Date:

**(THANK YOU FOR SUBMITTING THIS REFERRAL TO LIVES LIVED WELL. A LIVES LIVED WELL STAFF MEMBER WILL RESPOND TO YOUR REFERRAL WITHIN 2 BUSINESS DAYS)**

**Please submit the completed referral form to the relevant LLW Service Hub detailed below.**

<b>Location</b>	<b>Email</b>
<b>Cairns</b> <b>Townsville</b> (and surrounding areas of Ayr, Charters Towers, Hughenden, Richmond) <b>Mackay</b>	<a href="mailto:northqld@liveslivedwell.org.au">northqld@liveslivedwell.org.au</a>
<b>Gladstone</b> (and surrounding areas including Biloela) <b>Rockhampton</b> (and surrounding areas including Yeppoon)	<a href="mailto:centralqld@liveslivedwell.org.au">centralqld@liveslivedwell.org.au</a>
<b>Caboolture; Redcliffe; Deception Bay; Strathpine</b>	<a href="mailto:brisbanenorth@liveslivedwell.org.au">brisbanenorth@liveslivedwell.org.au</a>
<b>Longreach</b> (and surrounding areas including Barcaldine)	<a href="mailto:westernqld@liveslivedwell.org.au">westernqld@liveslivedwell.org.au</a>
<b>Kingaroy</b> (and surrounding areas including Cherbourg and Murgon)	<a href="mailto:southburnett@liveslivedwell.org.au">southburnett@liveslivedwell.org.au</a>
<b>Toowoomba</b> (and surrounding Darling Downs including Dalby, Gatton, Oakey, Pittsworth, Tara, Warwick, Chinchilla)	<a href="mailto:darlingdowns@liveslivedwell.org.au">darlingdowns@liveslivedwell.org.au</a>
<b>Maroochydore</b> (and surrounding areas Caloundra, Noosa, Mooloolaba etc.)	<a href="mailto:sunshinecoast@liveslivedwell.org.au">sunshinecoast@liveslivedwell.org.au</a>
<b>Burleigh; Nerang</b> (and surrounding areas of Gold Coast)	<a href="mailto:goldcoast@liveslivedwell.org.au">goldcoast@liveslivedwell.org.au</a>
<b>Beenleigh</b> (and surrounding areas including Inala, Beaudesert)	<a href="mailto:brisbanesouth@liveslivedwell.org.au">brisbanesouth@liveslivedwell.org.au</a>

**Or submit your referral to [info@liveslivedwell.org.au](mailto:info@liveslivedwell.org.au)**