

AGENCY REFERRAL FORM

CONTACT DETAILS

Name of referral agency			
Name		Job Title	
Address			
Postal Code		Telephone	Mobile
Email			

YOUNG PERSON CONTACT DETAILS

Name			
Address			
Postal Code		Telephone	Mobile
Email			Gender
Date of Birth			Age
National Insurance Number			No of Dependents

What type of accommodation is the young person currently living in?

How long have they lived there?

What are the main reasons for referral?

Please list the young person's Support Needs

Is the young person currently participating in or completed a program which assists the young person to address the identified needs?

DEFINITIONS OF THREE SUPPORT NEEDS GROUPS

HIGH SUPPORT NEEDS

- Young person displaced from his/her family, community, and peer support networks
- Young person with limited/poor self-esteem
- Young person with mental health concerns including those who are clinically diagnosed e.g., self-harm
- Young person excluded from education, training, youth services etc,
- Young person who has gone through multiple accommodation placement breakdowns
- Young person who exhibits challenging behaviour associated with 'high risk' e.g., drug/alcohol misuse
- Vulnerable young person without support networks, e.g., with a learning disability
- Young person in conflict with the law
- A young parent who is having difficulty coping
- Young person with limited literacy, numeracy, communication, and life skills

MEDIUM SUPPORT NEEDS

- Young person who has difficulty maintaining involvement in education and training
- Young person who needs support to develop life skills
- Young person with emotional support needs i.e., not in 'crisis'
- Young person who may have initial difficulties in settling into accommodation
- Young person who has had some preparation for independent living
- Young person where there is a moderate misuse of alcohol/drugs
- A young person who has limited coping skills
- Young person with a moderate to low learning disability/difficulty

LOW SUPPORT NEEDS

- Young person who has some positive support networks
- Young person who has adequate preparation and who has developed some independent living skills
- Young person who can seek support and access services
- Young person who is engaged in employment, education, or training
- Young person who has established some positive relationships

Which of the above support needs group do you feel best describes the young person?

- High High/Medium Medium Medium/Low Low

Please explain the reasons for your description of the young person below, please include any immediate risk factors.

Empty text area for providing reasons and risk factors.

All your information will be processed in accordance with GDPR. Please see our Privacy Statement for further information. www.shelterni.org

Please return completed form to slate@shelterni.org or
SLATE Project
33-35 Castle Street
Omagh
BT78 1DD

Signed		Date	
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