**2016 EIYBC Program Referral**

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| **BACKROUND DETAILS** |
| SURNAME………………………………………… | GIVEN NAMES………………………………………………………………………………….. |
| DOB …………………………………………………… |  | AGE………………………… | SEX |  Male / Female |  |
| ADDRESS……………………………………………………………………………………………………………………………………………………………………………………… |
| SUBURB………………………………………………………………………………………………………………………………. |  | POST CODE ……………………. |
| REFERRAL AGENCY ……………………………………………………………………………………………………………………………………………………………………… |
| NAME OF PERSON MAKING REFERRAL…………………………………………………………………… CONTACT NUMBER ………………………………… |
| EMAIL ADDRESS………………………………………………………………………………………………………………………………………………………………………….. |
| PARENT/CAREGIVER NAME ………………………………………………………………………… CONTACT NUMBER……………………………………………….ALTERNATIVE CAREGIVER NAME: ………………………………………………………………. CONTACT NUMBER………………………………………………. |
| DOES THE YOUNG PERSON IDENTIFY AS ABORIGINAL OR TORRES STRAIT ISLANDER? YES / NO |
| OTHER CULTURAL BACKGROUND INFORMATION……………………………………………………………………………………………………………………….. |
| **CONSULTATION WITH YOUNG PERSON, SCHOOL, FAMILY AND COMMUNITY** |
| Consent to discuss this referral from Young person YES / NO signed ...........................................................or vebal  from Parent/ caregiver YES / NO signed ...........................................................or vebal  |
| Any other consultation that has occurred with young person, family & community in terms of this referral?………………………………………………………………………………………………………………………………………………………………………………… |
| **SELECTION CONSIDERATIONS** |
| Is there historical or current evidence of family and parental conflict? |   | Yes | No |
| Is the young person being raised in an environment of poor parental supervision and discipline? |  | Yes | No |
| Is there evidence that is young person is associating with a peer group with anti-social attitudes? |   | Yes | No |
| Are family members involved in the criminal justice system or condoning antisocial behaviours?  |  | Yes | No |
| Is there a history of child maltreatment, neglect or child protection concerns? |   | Yes | No |
| Is there current offending or anti-social behaviour (including disturbing the peace and/or trespassing)? | Yes | No |
| Is the young person at risk of becoming disengaged from education, training or vocational work roles? | Yes | No |
| Is the young person homeless?If yes - Describe current situation that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… | Yes | No |
| Does this young person have a history of sexual offending? | Yes | No |
| If yes - Describe current situation that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… |  |  |
| Does this young person have a history of violent aggressive acts towards others?If yes - Describe current situation that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… | Yes | No |
| Is there evidence of severe cognitive or social impairment (e.g. functionally impairing FASD/autism)?If yes - Describe current situation that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… | Yes | No |
| Is the young person suicidal or presenting with severe psychological problems (e.g., psychosis)?If yes - Describe current situation that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… | Yes | No |
| Has the young person used alcohol or drugs before the age of 14? |  | Yes | No |
| If yes - Describe current alcohol or drug use that will impact on attendance on the program ……………………………………………………………………………………………………………………………………………………… |  |  |  |
| **CURRENT SITUATION** |
| **Please answer the following on the basis of your best judgement. In the past 4 weeks, on how many separate occasions has the young person:** |
| Used alcohol or drugs (or misused prescription medication) | 0 1 2 3 4-9 10+ |
| Participated in an organised sporting or community group activity | 0 1 2 3 4-9 10+ |
| Shared time with prosocial peers (outside of school/education/work) | 0 1 2 3 4-9 10+ |
| Broken the law or committed an offence | 0 1 2 3 4-9 10+ |
| Been verbally aggressive or violent towards another person | 0 1 2 3 4-9 10+ |
| Truanted or refused to attend school | 0 1 2 3 4-9 10+ |
| Witnessed or participated in family violence | 0 1 2 3 4-9 10+ |
| Been verbally or physically aggressive towards authority | 0 1 2 3 4-9 10+ |
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| **STRENGTHS AND NEEDS** |
| **On the basis of your best judgement, please respond to the following statements that relate to your current observations and assessment of the young person being referred to the EIYBC Program.**  |
| **HEALTH AND WELLBEING** |  |  |  |  | Not at all | Somewhat | Very much so |
| Is willing to engage with supporting agencies to manage and improve their health | 1 2 3 4 5  |
| Has the knowledge and skills to manage their health and wellbeing | 1 2 3 4 5  |
| Struggles to regulate their feelings or emotions (anger, sadness, grief, anxiety) |   | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **FAMILY AND COMMUNITY CONNECTIONS** |  |  |  | Not at all | Somewhat | Very much so |
| Is provided support by safe, stable and predictable family members |   |   | 1 2 3 4 5  |
| Has an identified community group which provides meaning and validation | 1 2 3 4 5  |
| Has ongoing contact to safe, predictable and prosocial adult relationships |   | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **HEALTHY FRIENDSHIPS** |  |  |  |  | Not at all | Somewhat | Very much so |
| Has regular extended contact with one or more prosocial peers |   |   | 1 2 3 4 5  |
| Has the knowledge and skills to form healthy prosocial peer or adult relationships | 1 2 3 4 5  |
| Identifies strongly (e.g., idealises, looks up to) with anti-social peers or adults |   | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **PROSOCIAL THINKING AND CHOICES** |  |  |  | Not at all | Somewhat | Very much so |
| Has positive attitudes to authority (e.g., teachers, police) |   |   | 1 2 3 4 5  |
| Can critically judge and review the consequences (positive and negative) of future decisions | 1 2 3 4 5  |
| Can consistently demonstrate self-control (manage impulses without reacting) |   | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **ALCOHOL AND OTHER DRUGS** |  |  |  |  | Not at all | Somewhat | Very much so |
| Understands the consequences of alcohol and drug use |   |   | 1 2 3 4 5  |
| Can negotiate negative feeling states (anger, anxiety, grief) without using alcohol or drugs | 1 2 3 4 5  |
| Identifies strongly (e.g., idealises, looks up to) with peers or adults who use alcohol or drugs | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **POSITIVE RISK TAKING** |  |  |  |  | Not at all | Somewhat | Very much so |
| Has the knowledge and skills to identify future goals and set actions for those goals |   | 1 2 3 4 5  |
| Has the knowledge and skills to express persistence and determination |   | 1 2 3 4 5  |
| Is willing to ask for help or support when undertaking an unfamiliar task | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **IDENTITY AND CULTURE** |  |  |  |  | Not at all | Somewhat | Very much so |
| Is able to express a personally meaningful narrative of their family or cultural heritage |   | 1 2 3 4 5  |
| Has ongoing access to prosocial family/cultural mentors or leaders | 1 2 3 4 5  |
| Demonstrates pride in their cultural or family identity | 1 2 3 4 5  |
|  |  |  |  |  |  |  |  |  |
| **BOUNCE BACK THINKING AND BEHAVIOUR** |  |  |  | Not at all | Somewhat | Very much so |
| Has a hopeful or optimistic outlook to life |   |   |   | 1 2 3 4 5  |
| Demonstrates the skills and abilities to solve problems (problem solving ability) |   | 1 2 3 4 5  |
| Talks about themselves and their abilities in a generally positive and self-accepting manner | 1 2 3 4 5  |
| **RESPONSIVENESS TO CHANGE AND GOAL SETTING** |
|  |  |  |  |  |  | Not at all | Somewhat | Very much so |
| This young person has high levels of awareness of their problems impacting on their life | 1 2 3 4 5  |
| This young person is motivated to make changes in their life | 1 2 3 4 5  |
| This young person is willing to work alongside adults to set goals for their future | 1 2 3 4 5  |
| This young person sees the EIYBC program as an opportunity to make positive changes | 1 2 3 4 5  |

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| **OTHER DETAILS** |

Please outline any other details that you believe will help support this young person’s involvement in the EIYBC program

4 week pre-camp engagement:

On 8 day camp:

10 week post case-management:

**Thank you for your referral**