



INTEGRATED FAMILY SUPPORT REFERRAL FORM

Referral Criteria checklist:

- There is a child under 18 years of age and
- The family would benefit from access to family support and/or a referral to a support service related to IFS focus areas, and
- The child and family have had previous involvement with, or are at risk of progressing into the statutory child protection system without support, and
- Verbal consent given by the family to be referred
- Child/rens attendance at school is consistent (Goodna IFS only)

IFS focus is on:

- Improving the wellbeing and safety of children, young people, and their families,
- Building the capacity of families to nurture, care for and protect their children,
- Providing linkages to local universal support services/community groups to enable families to access the resources to build their capacity to solve problems and make positive choices and changes,
- Preventing entry or re-entry to the statutory child protection system.

Person Referring:		Date:	
Organisation:		Phone:	

Referred Child / Children's Details

Name	DOB	Gender	Ethnicity	NDIS	School and year level
				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required	
				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required	
				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required	
				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required	

Other Family and / or Household Members

Name	Gender	DOB	Relationship	Ethnicity	NDIS
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Required

Family Address:			
Family Mobile Phone No.:		Family Email:	



Support required

- Parenting - Attachment, Routines, Boundaries, Positive Discipline
- Domestic Violence
- Healthy Relationships, Communication
- Emotional Regulation
- Drug, Alcohol use
- Health - General, Mental and Emotional
- Practical assistance - Household Management, Budgeting, Transport
- Linking with other services
- Support network

Current Circumstances:

Please add as much information as you know about the referred child & parent or attach documents are required.

Services involved or Supporting Organisations Involved with Family:

(e.g. Counsellor, Child Safety, School, Church Group, Sports Club)

Organisation	Contact Person	Phone Number

Safety Risks to Staff

Restrictions regarding parents' availability