

6. Have the family received any other help for this difficulty? YES/NO

If yes, can you describe this and if you think it helped.

7. Is there anyone else involved with the child/young person or family that you think it would be helpful for us to know about? For example, have they had a paediatric or CAMHS assessment in the past?

8. Any other information you would like us to know?

9. How did you become aware of services provided by the Family Trauma Centre?

We cannot accept referrals that have not been fully and accurately completed within each section.

SIGNED: _____

DATE: _____