

Self-Referral Form for General Therapies Services

You can return your completed form to us by email or post, or you can call us on 01904 412551 choose option 1 and we will complete your referral over the telephone

Email: APTinfo@theretreatyork.org.uk

Post: The Retreat, The Tuke Centre, 28 Green Dykes Lane, York, YO10 3HH

If you would prefer our form in another language or in large print, please contact us on 01904 412551, choose option 1 and speak with one of our specialist administrators.

SELF REFERRAL FORM

Do you have a preference of how you attend your appointments?		
I prefer face to face appointments	*I prefer online appointments	*I don't mind

*If you have online sessions your therapist may be based in another town so it may not be possible to see the same therapist if you decide to change from online to face to face appointments

Surname:		First Name:		Date of Birth:	
Home Address:			GP Name and Address:		
Post Code:		GP Tel:			
Are there any children under the age of 18 living in your household?					Yes / No
Email address:					
Preferred contact number:		Preferred method of contact:		phone / email / post	
Do you agree we may leave a voicemail?		Yes / No	Do you agree we can send you SMS messages?		Yes / No
Availability for Appointments:					

To help us understand how you chose our service, could you please indicate how you heard about The Retreat Clinics by selecting one of the below:

Social Media	Web search	Word of Mouth	Radio Advert	Recommend by GP	Recommended by Educational Setting	Other: please state

What are your reasons for seeking therapy?

Are you involved with any mental health services at present? If yes, please give details including names & contact details of professionals /Care Co-ordinator involved.

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Have you had any therapy before? If yes, please provide some details, including an indication of how it helped you.

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Are there any current concerns or risks relating to your physical health? For example, any disabilities, weight, diet, use of drugs/alcohol or sleep.

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If you answered yes to the previous question, please provide further information in the box below:

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We are asking the following three questions to make sure that we can care for you safely. If we are concerned that you, or somebody else, is at risk of harm and our therapy services are not best placed to support you we may need to suggest alternative support to you and we may need to share information with other healthcare professionals in an attempt to keep you or somebody else safe.

1. Within the past few weeks, have you experienced any suicidal thoughts and / or thoughts of harming yourself in any way?

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2. Have you ever caused harm to any other person and/or having thoughts to do so?

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3. If you have answered yes to either of the previous questions, please provide further information in the box below:

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If you are not funding the therapy yourself, please let us know who will be funding it	
Insurance Provider:	
Insurance Provider Membership Number	

If another person or organisation is funding your therapy, please provide their full contact details:			
Name:			
Address including Post code:			
Phone:		Email:	
I give The Retreat my consent to contact this person about my referral		Signature:	

DATA PROTECTION

For the purposes of the General Data Protection Regulations 2016 (GDPR) / Data Protection, The Retreat York is the data controller for the collection, processing, sharing and storage of this data. All information collected in this form will be for the sole purpose of providing a clinical service to you and will only be passed to third parties who support us in the administration of this service or where we have your consent to do this. However, we may have to break this confidentiality where we have a legal obligation to comply with the law for example. the information is required to detect a crime or apprehend an offender or to support a safeguarding issue such as where we are concerned that you or someone else is at risk of harm. We will share information in an attempt to keep you or someone else safe, this might mean us contacting other health professionals, a crisis service or the police.

Further information about this can be found in our Privacy Notice on our website at:
<https://www.theretreatyork.org.uk/>.

Our Privacy Notice will advise you of whom we share information with, how long we keep your information for and what your legal rights are in respect of your data. Alternatively, you can contact our Data Protection Officer for further information at: The Retreat York, 107 Heslington Road, York, YO10 5BN or email us at:
DPO@TheRetreatYork.org.uk.

All information is retained in accordance with our corporate retention guidelines.

DECLARATION:

By submitting this form to The Retreat York, you agree that the information you have provided is complete and true. You agree that:

- You are aged 18 years or older.
- You understand our terms of service, including our Data Protection statement, our cancellation policy, payment policy and refund policy. All of which are a condition of your service and agreement with us.
- All information about you will be shared with our therapists to allow them to provide a service to you.
- You can withdraw from the service/agreement at any time; however, charges will still apply to all booked sessions as per our cancellation policy.

All information in this form will be treated as strictly confidential.

Signature:

Date:

Help in A Crisis

There are many things that can make us feel low or hopeless and these feelings can come and go but it is important to take them seriously.

If you are having thoughts of suicide, are harming yourself or have thoughts about self-harm it is important to tell someone.

These thoughts and feelings can be complex, frightening, and confusing but you do not have to struggle alone.

Whilst The Retreat is not able to provide crisis services, if you feel unable to cope or keep yourself safe please contact your GP immediately, or contact an organisation who specialises in crisis support, we have listed some organisations below who may be able to help you

Tees, Esk and Wear Valleys NHS Foundation Trust – all people of all ages
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Call: 0800 0516 171

Website: www.tevv.nhs.uk/crisisadvice

Available 24 hours

Area: County Durham, Teesside and most of North Yorkshire

Samaritans – all people of all ages

Call: 116 123

Email: jo@samaritans.org

Available 24-hour

Area: UK Nationally

Campaign Against Living Miserably (CALM) - Men
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Call: 0800 58 58 58

Webchat: www.thecalmzone.net/help/webchat/

Available 5pm to midnight every day – Cover National
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Area: UK Nationally

Papyrus- people under the age of 35

Call: 0800 068 41 41

Text: 07860 039967

Email: pat@papyrus-uk.org

Available Monday to Friday 9am to 10pm, weekends and bank holidays 2pm to 10pm
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Area: UK Nationally
