



Portsmouth Advocacy

Community Advocacy Referral Form

For Portsmouth City residents living in PO1 – PO6

Person who needs advocacy:

Name:	Date of birth:
Address:	
Telephone:	Mobile:
Email:	Ethnic background:

Person making referral:

Is this a self-referral? Yes/No (If yes, leave box below blank)

Name:	
Relationship to Individual:	
Organisation (include Locality and Team):	
Telephone:	Email:
Does the person know/ consent to this referral?	Yes/No

Is the referral in relation to:

Mental Health	
Autism	
Learning Disability	
Physical disability	
Sensory disability	
Other (please specify)	

Are you currently under a mental health service? (eg. Mental health team, Talking Change, wellbeing centre)	Yes/No
Do you/ does the person have support with their issue from family, friends, community services?	Yes/No
Do you/does the person have health and social care services currently?	Yes/No
If yes (Please give details including AIS/NHS number):	
If yes do you/does the person give permission for the service provider to be contacted.	Yes/No

Is there anything else we should know about you/ the person? i.e. how to make contact; special needs with communication?

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Any risks or behaviours that may affect lone working:

Details of situation and independent advocacy support required:

Timescales or deadlines involved:

Portsmouth Advocacy Service delivers advocacy provision as a partnership of five organisations. We have a commitment to work together to provide a co ordinated service for individuals. As part of this, we may need to share individual information across the partnership. We are committed to ensuring that this is done only where necessary, with your permission where possible, with management agreement and according to our information sharing protocol guidelines.

Signed.....

Date.....

Please return completed form to us:

By email to portsmouthadvocacy@solentmind.org.uk

By fax to 023 8020 8954

By post to Solent Mind, John Pounds Centre, 3 Aylward Street, Nutfield Place, Portsmouth PO1 4JT

Telephone enquiries 023 9283 7777