

Peer Support Referral Form

Peer Support is offered to people with mental health conditions on a one to one basis. Our volunteers offer *purposeful* support for a set time period, which will be agreed at an initial meeting. The support is based on the principles of listening, sharing experiences and having an equal relationship rather than providing expert or clinical advice.

Please complete this form to the best of your ability including as much information as possible if you wish to access the Mind Jersey Peer Support service. This applies if you are self-referring, with support from someone or completing the form on behalf of someone else.

Any information provided in this form will remain confidential and will be treated in accordance with the Data Protection (Jersey) Law 2018.

Personal Details			
Name			
Address			
Telephone number			
Email address			
Date of birth			
Referred by (include			
name & telephone			
number)			
Date			
Office Use Only:			
Date referral received			
Received by			

Please tell us what you would like support with and give specific examples if possible.			
What is the current nature of your mental health problem, including diagnosis if diagnosed.			
Are you currently being supported by a mental health service or professional? Yes No No			
Are you currently being supported by a mental health service or professional? Yes No If yes, please provide details.			
Are there any needs or requirements that we should be aware of to help you access the service? (E.g.			
Medical conditions, mobility, hearing, visual, literacy, language etc)			

Is there anything else you would like to tell us to help you get the most out of the service?				
How did you hear about the service?				
Mind Jersey Website	Mind Jersey Peer Support Leaflet	Other Professional/Service*		
Mind Jersey Social Media	Mind Jersey*	Other*		
*Please give details				
Please sign to confirm the information you have given is true to the best of your knowledge.				
Signature:				
Referrer Signature (if not self-referral):				
Date:				

Please return this form marked "Private and Confidential" to:

Peer Support Service Mind Jersey Centurion House 17 Beresford Street St Helier JE2 4TW

Alternatively you can email it to peersupport@mindjersey.org.

For more information on Peer Support and the services on offer, please call us on 880584 or visit www.mindjersey.org.