The aim of the Wellbeing Befriending Service is to therapeutically support individuals with mild to moderate mental health issues to improve their overall wellbeing and reduce isolation. Our Wellbeing Befriending Service is funded until May 2022.

Importantly, this is **NOT** a counselling service, parallel or replacement service for clients who are still experiencing psychotic episodes, or addiction. Befriending is a goal setting service for your client to engage with and help them reconnect with their wider community.

Please proceed if you can answer **YES** to the following questions:

* If the client has struggled with addiction, have they been abstinence for 3 months or more?
* Has the client has been stable for a minimum of 6 months from a psychotic episode?
* Is this person able to engage with guided self-help, small goal setting and be able to work towards them?
* Is the client currently safe and able to take care of themselves?
* Are they at a point in their recovery where guided self-help will be suitable?

|  |  |
| --- | --- |
| Has the client consented to this referral? | Yes / No |
| Is this a self-referral? | Yes / No |

**Referrer information:**

|  |  |
| --- | --- |
| Full name |  |
| Relationship to Client |  |
| Referral Organisation |  |
| Address & Contact details |  |

**Client information:**

|  |  |
| --- | --- |
| Full name |  |
| Date of birth |  |
| Address & Contact details |  |

**Please tell us a little about this person and how they might benefit from Befriending?**

|  |
| --- |
|  |

**Please identify mental and/or physical health conditions your client experiences:**

|  |
| --- |
|  |

**Please provide details about any of the following risks you are aware of:**

|  |  |
| --- | --- |
| Drug use |  |
| Alcohol use |  |
| Self-harm / suicidal ideation |  |
| Harm to others |  |
| Harm from others |  |

|  |  |
| --- | --- |
| **SUPPORT NETWORKS – INCLUDING CONTACT DETAILS** | |
| Doctors |  |
| Psychiatrist |  |
| CPN / CMHT |  |
| Occupational Therapist |  |
| PA |  |
| Other |  |

**Is there any other information that might be relevant?**

|  |
| --- |
|  |

Once complete, please email to [wellbeing@vasl.org.uk](mailto:wellbeing@vasl.org.uk)