

Screening and Referral for Triage Form Substance Misuse - Blackburn with Darwen DAAT

BOX 1: Client details (including area of residency)

Name: _____ Date of Birth DD/MM/YYYY _____

Address: _____

Postcode: _____ Phone Number: _____

Gender: Male [] Female [] Pregnant? Yes [] No [] Homeless? Yes [] No []

If urgent health care issues are identified contact:
 Accident and Emergency Dept.
 Royal Blackburn Hospital
 Tel: 01254 263555 or in Emergencies: tel. 999 and ask for Ambulance.

Referring agency details

Name of worker completing this form: _____

Date of referral: _____

Name and address of your service: _____

Your contact details

Email: _____

Phone: _____

Fax _____

BOX 2: Drug use and related problems

Drug use	How often	How much	Inject?	Problem (Yes / No)
Heroin	_____	_____	Yes [] No []	Yes [] No []
Cocaine	_____	_____	Yes [] No []	Yes [] No []
Crack	_____	_____	Yes [] No []	Yes [] No []
Alcohol	_____	_____	Yes [] No []	Yes [] No []
Amphetamine	_____	_____	Yes [] No []	Yes [] No []
Cannabis	_____	_____	Yes [] No []	Yes [] No []
Methadone	_____	_____	Yes [] No []	Yes [] No []
Benzos (e.g. anti depressants, sleeping tablets etc)	_____	_____	Yes [] No []	Yes [] No []

Other drugs being used (specify names) _____

What sort of problems does your drug / alcohol use cause? _____

Are you a parent / carer of dependent children? Yes [] No []

Any other relevant information? _____

Do you have a GP? Yes [] No [] (If yes GPs name and or Health Centre?) _____

If any problems are identified please answer the following question
 Would you like help for Your drug / alcohol problems?
 Yes No

If yes, please complete the remaining questions in BOX 2, before moving to complete the consent to treatment and onward referral section (BOX 3)

If there are any safeguarding issues in respect of children/ young people please contact the Referral and Assessment Team Blackburn with Darwen Children's Services 01254 587547.

Please indicate when a referral has been made to any of the following agencies:

Lineage (If a young person aged 18 years or under – or a vulnerable adult up to 25 years)

Referred ? YES [] NO []

Those over 19 should be referred to either of the following agencies

BwD Substance Misuse Service (GMW)

Referred ? YES [] NO []

EVOLVE (Inward house)

Referred? YES [] NO []

BOX 3: Consent to treatment and onward referrals – client must agree and provide their signature for this information to be retained or forwarded to other agencies

I hereby consent to have my details retained and forwarded to the most appropriate treatment agency and I confirm that this process has been fully explained to me:

Clients Signature: _____ Date: _____

Contact details for referral agencies and other services can be found overleaf.

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Section 1 Urgent Cases

If the case is considered an urgent health problem (physical or mental) refer directly to:

A and E at Royal Blackburn Hospital Tel : 01254 263555

In emergencies ring 999 and ask for ambulance.

For non urgent or non emergency cases go to section 2

Section 2 Area of residency

If the client is from Blackburn with Darwen go to section 3
If not, please contact the local DAAT for relevant services
www.drugs.gov.uk/dat/directory

Or for nearby areas of residency call:

Bolton DAT 01204 331233 Lancashire DAAT 01772 647116
Bury DAT 0161 253 6004 Blackpool DAT 01253 651160

Section 3 Young People's Services

Is the client is aged 19 or over Yes / No : If yes (aged 19 or over), go to section 4 If no (aged 18 or younger), refer to the following service's):

If the client is 18 or younger and has a drug or alcohol problem : Refer to Lifeline: Telephone 01254 677493, fax 01254 677503

If the client is injecting or considering injecting drugs: Refer also to Jarman Centre Telephone: 01254 669436, fax 01254 669449

Section 4 Adult Services

If the client is aged 19 or over they should be referred to the following service(s):

If the client is over 19 and has a drug or alcohol problem: Refer to EVOLVE: Telephone 01254 297050, fax 01254 297051

Or to Blackburn with Darwen Substance Misuse Service (GMW SMS): Telephone 01254 226062, fax 01254 671695

If the client is injecting or considering injecting drugs: Refer also to Jarman Centre Telephone: 01254 669436, fax 01254 669449

Please note that if the person is considered a vulnerable adult under the age of 25 years, it may be appropriate to refer to the young peoples service Lifeline (as at section 3). If unsure please ring them for advice on 01254 677493.

Section 5 Open Access and drop – ins

All clients should be given information about the following drop in facilities within Blackburn with Darwen:

EVOLVE Inward House - Telephone 01254 297050 for details

THOMAS Sunday to Friday 1pm till 2pm – closed on Saturday's: Telephone 01254 59240

GMW SMS have open access drop ins across Blackburn with Darwen at a variety of times, locations and days, for more details; please telephone 01254 226062.

Lifeline Young People's Open Access Service Monday to Friday 9.30am – 5.30pm : Telephone 01254 677493.

Needle Exchanges

Jarman Centre (adults) Monday to Thursday 10.30am - 12 noon and 1pm - 4.30pm (Friday 1pm -4.30pm only)

Jarman Centre (young people) Wednesday 4.30pm -6pm only

Darwen needle Exchange (Boots) Monday to Saturday 10am - 5.30pm