

Who can we support?

Families with children 0-18 years, and young people who are connected with their family, who reside in the Parramatta LGA. Targeted Early intervention is a DCJ funded program, that aims to support individuals within the family and the family unit as whole, through 12 weeks of case-management and associated programs and projects.

Need More Information?

See our website for more details of the program: www.hopeconnect.org.au

For more information, please call us on 9638 7955

Please complete **all** areas, attach assessments, and return form to: admin@hopeconnect.org.au

REFERRER DETAILS				Date of Referral		
First Name				Last Name		
Organisation				Or	Self Referral	Family/Friend
Position				Or	Relationship to client	
Phone				Email		
Consent	Yes	No				

CLIENT DETAILS							
First Name				Last Name			
Address							
Suburb				Postcode			Date of Birth
Phone				Email			
Gender		ATSI	Yes	No	CALD	Yes	No
Are either of the parents under 21 years of age?		Yes	No	Formal M/H, physical diagnosis			

PARTNER/PRIMARY CAREGIVER DETAILS							
First Name				Last Name			
Address							
Relationship to client					Date of Birth		
Phone				Email			
Gender		ATSI	Yes	No	CALD	Yes	No
				Formal diagnosis		Yes	No

CHILDREN							
Name (First & Last)	D.O.B	Age	Gender	Formal Diagnosis(Y/N)	Primary custodial caregiver	ATSI	
1							
2							
3							
4							
5							
6							
7							
8							

HELPFUL INFORMATION FOR US

Main language spoken at home	
Best method of communication (mobile/email)	
Availability (specify days and times available)	
Communication support needs Hearing/vision/Reading & Writing/Interpreter	
Services already involved	
How did you hear about us?	

CURRENT CONCERNS (please tick)

Family & Domestic Violence		NDIS	
Children at Risk		Community Participation	
Parenting		Housing	
Family Functioning		Employment	
Isolation		School attendance	
Material & Financial Wellbeing		Education & Skills Training (parent)	
Mental Health Concerns		Child development	
Abuse (sexual/psychological /physical/financial)			
Addiction (drug, alcohol, gambling, sexual, gaming)			
Wellbeing (physical, emotional, spiritual, cultural)			

MY STORY**SERVICES INTERESTED IN (please tick)**

Family & Youth Support	Individual	Family	
Playgroup		Youth Programs	
Parenting Education		School Holiday Programs	
Counselling		Financial Support (Material Aid/NILS)	
Community Connection		Teloopa Shed	

SAFETY INFORMATION					
ACCOMMODATION					
Type of accommodation:					
House	Flat	Caravan	Homeless	Supported Accommodation	
Private	Community Housing		DOH	Temporary	Other
Access					
Risks					
Pets					
Firearms					

DOMESTIC VIOLENCE SAFETY ASSESSMENT QUESTIONS (if applicable)					
Name of person committing violence:					
What is their relationship to the client:					
Please indication types of abuse perpetrated:			Verbal	Emotional /Psychological	Spiritual
Financial	Cyber bullying / harassment	Social	Sexual abuse /control	Physical	Fear /Intimidation
Is there an ADVO in place?	Yes	No			
If YES -	Provisional	Interim	Final		
Please provide details about how the AVDO came into place					
What are the conditions/orders of the ADVO:					
When did it commence?				When does it expire?	
Has the AVDO been breached?		YES	NO		
If YES please provide details:					
Start Safely Housing details					