

Mediation Referral Form

Call: 01562 743111

Anyone aged 11-25 and their parent/carer can access mediation. You must be a resident in the Wyre Forest or South Worcestershire (Kidderminster, Bewdley, Stourport, Worcester City, Droitwich, Evesham, Pershore or Malvern Hills).

*Section 1	Referrers details *Section 1 to be completed by agencies only		Date of Referral:	
Name of Referrer		Job role		
Email		Contact no.		
Organisation		Mobile no.		
Where did you hear about us?				

*Section 2	Young Person Y/P details (PARTY 1) *Sections 2-4 to be completed by self-referrals and agencies				
Name					
Date of birth		Age		Gender	
Address					
Postcode		Contact No.			
Email					
School / College					
Has Y/P agreed to mediation?	Yes		No		

Section 3	PARTY 2 details (this can be parent/carer/young person)				
Name					
Relationship to y/p				Email	
Address (if different to y/p)					
Postcode				Tel.	
Has Party 2 agreed to mediation?	Yes	Yes	No		

Section 4	Reason for Mediation/Conflict coaching referral (brief description of the conflict according to young person and/or family members including issues within the home and/or school)

Section 5	Young Peoples Need/Risk Assessment
------------------	---

Please provide full details of the issues experienced by the young person/family members, including any known risks	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Benefits <input type="checkbox"/> Care background <input type="checkbox"/> Domestic abuse <input type="checkbox"/> Family breakdown <input type="checkbox"/> Family mental health <input type="checkbox"/> Homelessness <input type="checkbox"/> Learning difficulty <input type="checkbox"/> Long-term health condition <input type="checkbox"/> Low income / pupil premium <input type="checkbox"/> Neurodiversity <input type="checkbox"/> Physical disability <input type="checkbox"/> School attendance (low) <input type="checkbox"/> School exclusion <input type="checkbox"/> Young carer <input type="checkbox"/> OTHER </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Alcohol / drugs <input type="checkbox"/> Anger <input type="checkbox"/> Anxiety <input type="checkbox"/> Bereavement <input type="checkbox"/> Blended family <input type="checkbox"/> Boundaries / rules / behaviour <input type="checkbox"/> Bullying <input type="checkbox"/> Communication <input type="checkbox"/> Family relations <input type="checkbox"/> Friendships <input type="checkbox"/> Mental health <input type="checkbox"/> NEET <input type="checkbox"/> Physical aggression <input type="checkbox"/> Self-harm <input type="checkbox"/> Sexual health <input type="checkbox"/> Suicidal <input type="checkbox"/> Verbal aggression <input type="checkbox"/> OTHER </td> </tr> </table>	<input type="checkbox"/> Benefits <input type="checkbox"/> Care background <input type="checkbox"/> Domestic abuse <input type="checkbox"/> Family breakdown <input type="checkbox"/> Family mental health <input type="checkbox"/> Homelessness <input type="checkbox"/> Learning difficulty <input type="checkbox"/> Long-term health condition <input type="checkbox"/> Low income / pupil premium <input type="checkbox"/> Neurodiversity <input type="checkbox"/> Physical disability <input type="checkbox"/> School attendance (low) <input type="checkbox"/> School exclusion <input type="checkbox"/> Young carer <input type="checkbox"/> OTHER	<input type="checkbox"/> Alcohol / drugs <input type="checkbox"/> Anger <input type="checkbox"/> Anxiety <input type="checkbox"/> Bereavement <input type="checkbox"/> Blended family <input type="checkbox"/> Boundaries / rules / behaviour <input type="checkbox"/> Bullying <input type="checkbox"/> Communication <input type="checkbox"/> Family relations <input type="checkbox"/> Friendships <input type="checkbox"/> Mental health <input type="checkbox"/> NEET <input type="checkbox"/> Physical aggression <input type="checkbox"/> Self-harm <input type="checkbox"/> Sexual health <input type="checkbox"/> Suicidal <input type="checkbox"/> Verbal aggression <input type="checkbox"/> OTHER
<input type="checkbox"/> Benefits <input type="checkbox"/> Care background <input type="checkbox"/> Domestic abuse <input type="checkbox"/> Family breakdown <input type="checkbox"/> Family mental health <input type="checkbox"/> Homelessness <input type="checkbox"/> Learning difficulty <input type="checkbox"/> Long-term health condition <input type="checkbox"/> Low income / pupil premium <input type="checkbox"/> Neurodiversity <input type="checkbox"/> Physical disability <input type="checkbox"/> School attendance (low) <input type="checkbox"/> School exclusion <input type="checkbox"/> Young carer <input type="checkbox"/> OTHER	<input type="checkbox"/> Alcohol / drugs <input type="checkbox"/> Anger <input type="checkbox"/> Anxiety <input type="checkbox"/> Bereavement <input type="checkbox"/> Blended family <input type="checkbox"/> Boundaries / rules / behaviour <input type="checkbox"/> Bullying <input type="checkbox"/> Communication <input type="checkbox"/> Family relations <input type="checkbox"/> Friendships <input type="checkbox"/> Mental health <input type="checkbox"/> NEET <input type="checkbox"/> Physical aggression <input type="checkbox"/> Self-harm <input type="checkbox"/> Sexual health <input type="checkbox"/> Suicidal <input type="checkbox"/> Verbal aggression <input type="checkbox"/> OTHER		

Privacy Notice – Data Protection Act 1998
 Wyre Forest & South Worcestershire Nightstop & Mediation service collects and holds personal data about service users for whom they provide support. We use this data to:

- Make decisions about your support needs
- Help us to work with you and agree the support you need
- Work effectively with others who may also provide you with support
- Make sure we manage our services effectively

This includes personal characteristics and sensitive information relevant for the services we provide. The information we collect may be stored electronically, on paper or a mixture of both, and we use a combination of working practices and technology to ensure that your information is kept confidential and secure.

We will not disclose any information that you provide ‘in confidence’ to anyone else without your permission, except in the few situations where disclosure is required by law, or where we have good reason to believe that failing to share the information would put someone at risk.

On occasion, we will provide personal information to external organisations who are working with us on a specific project or delivery of specific services. This is done under strict agreements regarding the security and confidential use of all personal data.

Please email completed referral form to: info@wfnightstop.org

*Office Use Only**

Referral Source (please x)	Self		Agency:		Ops Team	
Allocated Mediator/s			Agency Source			

