Request for Services - Self Referral for Therapy

**Steps:** Please read this page before sending a referral, a clinician will contact by phone and if ok to progress help book a first appointment. Then, if funding is needed, please complete two forms, GP + Anxiety NZ therapist to sign, give to WINZ, receive the funds directly and then pay for each appointment at Anxiety NZ.

1. We offer therapy for all ages. Our mental health GP is for ages 18+ in therapy with us. Therapy is available nationally and our clinical services have a fee. Our Peer Groups are free for people living in Auckland aged 18+. We support people with neurodivergence however we can’t offer ADHD/Autism diagnoses or ADHD meds.
2. **Therapy costs:** It costs $185 for each therapy session with a psychologist, or $78 with a training psychotherapist or counsellor. Our clinical services are not automatically government funded. A missed or late cancelled appointment will incur a fee. Please visit [Funding and treatment costs | Anxiety NZ](https://anxiety.org.nz/services/funding) for information.
3. **Funding**: People may receive financial assistance for therapy if they are low-income, part time workers, students, children or young people (up to $80 a week). *Funding process after your referral is accepted:*
* If already on a benefit use the [disability allowance form](https://www.workandincome.govt.nz/documents/forms/disability-allowance-application-for-existing-clients.pdf) and [disability certificate for counselling form](https://www.workandincome.govt.nz/documents/forms/disability-allowance-couselling.pdf) and take these to your Anxiety NZ therapist and local GP to sign. Tertiary Students use the [student disability allowance form](https://www.studylink.govt.nz/documents/forms/disability-allowance-application.pdf). Under 18yrs, caregivers use the [Child Disability Allowance - Work and Income](https://www.workandincome.govt.nz/products/a-z-benefits/child-disability-allowance.html)
* If you are a new WINZ client use the [Extra Help form](https://www.workandincome.govt.nz/documents/forms/extra-help-application.pdf) and [disability certificate for counselling form](https://www.workandincome.govt.nz/documents/forms/disability-allowance-couselling.pdf) and take these to your Anxiety NZ therapist and local GP to sign.
* The completed forms will need to be submitted to WINZ using the [MSD portal](https://my.msd.govt.nz/?utm_source=W%26I%20website&utm_campaign=login) or dropped off at your nearest WINZ service centre. Receive the allowance into your bank account and pay Anxiety NZ for each session.
1. *Anxiety NZ offers several services:*
* *Our 5* [Peer support groups | Anxiety NZ](https://anxiety.org.nz/peer) *in Tāmaki Makaurau / Auckland are free to join* *(referral is needed, aged 18+, living in Akld, eligible for public health services - contact us first to check on Peer Group space).*
* *Our 24/7 national 0800 Anxiety Helpline (0800 269 4389) is free to call.*
* *Visit our website for free* [Resources | Anxiety NZ](https://anxiety.org.nz/resources)
* Join our free eNewsletter for updates and advice [Sign up to our newsletter | Anxiety NZ](https://anxiety.org.nz/newsletter)
1. Anxiety NZ may not be able to provide therapy or peer support services to all people based on our available resources and the type of support required. **Our service is not suitable for people currently experiencing high risk of harm to self or others and it is important to seek help from a dedicated crisis support service**. We encourage people to contact [I Need Help Now | Mental Health Foundation](https://mentalhealth.org.nz/help). In danger now? Call 111.
2. You can read [our Privacy Policy here.](https://anxiety.org.nz/about/privacy-policy) A health professional referral can be arranged instead of, or in addition to, this referral.
3. Due to high numbers of referrals and limited resources, if our calls/emails/texts to get in touch to make a first appointment are not answered for more than two weeks we will close the referral.

As the person completing this referral, I confirm by **ticking** the box:

I have read and understand the above

The person I am referring consents to the information being shared in this referral:

**Today’s date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| Full name: |  |
| Date of birth and age: |  |
| Address: |  |
| Gender:  |  |
| Pronouns: *e.g. he/him, she/her, them/they..* |  |
| Ethnicity/s: |  |
| Cell phone: |  |
| Email: |  |
| What are the best times to contact you to discuss your referral?Is there anything else that is helpful to know about contacting you to discuss your referral? |  |
| Peer Groups are free if you are you eligible for publicly funded health services. Are you eligible?[*Getting publicly funded health services | New Zealand Government (www.govt.nz)*](https://www.govt.nz/browse/health/public-health-services/getting-publicly-funded-health-services/) |  |
| Are there cultural needs or preferences you would like to share? |  |
| How did you hear about Anxiety NZ?  |  |

* Have you previously engaged with mental health or psychological services: Yes / No

*If yes, please give details including when.*

* Do you have a mental health diagnosis? Yes / No

*If yes, please state diagnosis, including when and who made the diagnosis.*

* What issues are you currently experiencing that you would like support with?

 *Please give brief details about what is going on and the help you want from us.*

* How long has your current situation been happening?
* Have you experienced difficulties like this, or other significant periods of stress or mental health challenges previously in your life?"
* Are you currently taking medications? (Mental health related only) Yes / No

*If yes, please state what medications you are taking and how often.*

* Do you feel you are currently at risk of harm? (From yourself or others)
* Have you previously self-harmed? Yes / No

*If yes, please give details including when.*

* Do you have support?

*If yes, please give details of your mental health and wellbeing support.*

* Are you using Alcohol or Other Drugs to cope?

*If yes, please give details.*

**Which service/s of Anxiety NZ are you interested in?** (*Please tick all that apply*)

Assessment and therapy with a psychologist *($185)*

Assessment and therapy with a training psychotherapist or student counsellor *($78)*

Peer Support Group for aged 18+ in Auckland and eligible for NZ funded Health services *(free).*

*\*Each of our 5 groups have different waiting times to join. If you’d like to check if there is a space in a particular group before you refer you are welcome to contact* *reception@anxiety.org.nz* *or 09 846 9776.*

Mental Health GP - we offer therapy supported by psychiatric assessment and medication monitoring. Please note we have limited Mental Health GP hours, and these are reserved for people engaging in therapy with us *($250 assessment and $185 for all follow-up appointments).*

**Please tell us a bit more about what you are looking for:**

* Do you want to apply for funding as a low-income earner or student for a Disability Allowance with WINZ or Studylink to help cover the cost of therapy? For information visit:[Funding and treatment costs | Anxiety NZ](https://anxiety.org.nz/services/funding)*)*.
* Do you have preferred days and times for appointments?
* Do you want in-person appointments (Auckland only), online appointments (national) or both?
* Is there anything else you’d like us to know?
* Will another referral from your GP, Counsellor, or Health Worker be sent through?

Please email your completed form to: reception@anxiety.org.nz

Thank you and we will be in touch shortly.

Ngā mihi nui,

Anxiety New Zealand Trust.