



Chinese Mental Health  
Consultation Services Trust

## Vagus Centre 維家中心

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### Referral form

Referral Number: \_\_\_\_\_

<b>Referral source (please ✓):</b>			
<b>Organisation referral</b> <input type="checkbox"/>		<b>Individual referral</b> <input type="checkbox"/>	
		<b>Self-referral</b> <input type="checkbox"/>	
<b>Name of referring organisation</b>			
<b>Name of the organisation referrer</b>			
<b>Name of individual/self-referrer</b>			
<b>Date of referral:</b>			
<b>Referrer's contact number:</b>			
<b>Action required (please ✓):</b>		URGENT (within 72 hours)	<input type="checkbox"/>
		Medium (within 7 days)	<input type="checkbox"/>
		Normal (over 7 days)	<input type="checkbox"/>
<b>Client and family members</b>	<b>Name</b>	<b>Age</b>	<b>Gender</b>
<b>Address:</b>			
<b>Phone number:</b>			
<b>Language:</b>		<b>Cantonese / Mandarin / English /</b>	
		<b>Other:</b> _____	

<b>Reason for referral:</b>		
<b>Service needed (please ✓):</b>	Family assessment	<input type="checkbox"/>
	Risk of violence	<input type="checkbox"/>
	Family violence intervention	<input type="checkbox"/>
	Others (specify)	<input type="checkbox"/>
<b>Does the family: (please ✓)</b>		
	1. have a history of involvement with CYFS/Police	<input type="checkbox"/>
	2. member with mental health history	<input type="checkbox"/>
	3. member currently facing court charges	<input type="checkbox"/>
	4. parents are CURRENTLY undergoing family court proceedings	<input type="checkbox"/>
	5. have a Protection Order made over the years.	<input type="checkbox"/>
	6. under the assistance of Counsellors/psychological workers	<input type="checkbox"/>
<b>What is/are your concern(s):</b>		
<b>For CMHCST Use:</b>		
Date of receipt of the referral:		
Referral accepted:	Yes/No	
Referral allocated to:		
Data entered to the system (date and who by):		
Others:		

**Our Service aims:**

1. to foster and restore safety, wellbeing and harmony where family violence has or is at risk of occurring.
2. to facilitate violence-free family relationships and enhance positive family functionings.
3. to prevent from family violence re-occurring.
4. to alleviate any potential psychological and physical sufferings resulting from family violence/disharmony.
5. to promote Asian families to live harmoniously and settle happily in New Zealand.

**What we provide:**

1. Assessments for children, adults, and families: the needs; family functioning and safety issues.
2. Professional counselling services for children / adults / couples / families.
3. Referral to other services when appropriate.
4. Positive parenting training / workshops.
5. Culturally appropriate clinical services for Chinese.

For those persons who meet the criteria based on Ministry of Social Development funding are eligible to receive free counselling service.(up to six sessions)

**Who are we:**

1. A team of New Zealand qualified and experienced counsellors of Chinese ethnicity.
2. Speaking Mandarin, Cantonese and English.
3. Experienced in working in the NZ health and education sectors.
4. Ministry of Social Development approved provider.
5. Ministry of Justice approved programmes provider under the Domestic Violence Act 1995.