

# Provincial Youth & Young Adult Substance Use Treatment Program

## Referral Package



### PROGRAM MANDATE:

People who have a severe and/or high risk substance use disorder. Clients may have a stable co-occurring mental mild to moderate health disorder. Client attendance is on a voluntary basis only.

### OUR PROGRAM MAY BE RIGHT FOR YOU:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> BC Resident with Care Card Number</li> <li><input checked="" type="checkbox"/> Age 17-24</li> <li><input checked="" type="checkbox"/> Mental Health and Addiction Team or a</li> <li><input checked="" type="checkbox"/> Community Care Team Connection</li> </ul> | <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Medically and psychiatrically stable</li> <li>Not requiring acute hospitalization</li> <li><input checked="" type="checkbox"/> Independent with eating, toileting, and mobilizing</li> <li><input checked="" type="checkbox"/> Ability to benefit and reside in group living environment</li> </ul> |
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### OUR PROGRAM MAY NOT BE RIGHT FOR YOU:

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Recent violence and/or aggression</li> <li>• Severe violence, including sexual offences involving minors</li> </ul> | <ul style="list-style-type: none"> <li>• Medical and/or psychiatric needs requiring hospitalization</li> <li>• Recent Arson/Fire setting</li> <li>• Active suicidality and ideation</li> </ul> |
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While mental health supports will be provided, the program is not designed to treat mental health diagnosis. Please contact your Regional Health Authority Liaison (HAL) directly for questions. Please forward complete referrals to the specific Regional HAL.

### COAST MENTAL HEALTH

### PHOENIX SOCIETY

Identifying Female and Non-Binary

Identifying Male and Non-Binary

#### Vancouver Coastal Health Authority Liaison Central Addiction Intake Team

cait.youth@vch.ca  
 phone: 604-209-3705  
 fax: 604-255-1101

#### Interior Health Authority Liaison Tasha McAdam

tasha.mcadam@interiorhealth.ca  
 phone: 250-469-7070 ext. 12394

#### Fraser Health Authority Liaison Shannon Smith

shannon.smith@fraserhealth.ca  
 phone: 604-614-2383  
 fax: 604-519-8538

#### Island Health Authority Liaison Douglas Hardie

douglas.hardie@islandhealth.ca  
 phone: 250-739-5790

#### Northern Health Authority Liaison Brienne Boyd

brienne.boyd@northernhealth.ca  
 phone: 250-645-7415  
 fax: 250-645-8038

#### Provincial Health Access & Flow Coordinator Rita Grewal

accessandflowyaya@cw.bc.ca  
 phone: 604-875-2155

# Work with us in 3 steps.

1

CHECK OUT THE WEBSITE AND REFERRAL GUIDELINES TO MAKE SURE THE PROGRAM MEETS YOUR CLIENT'S NEEDS. IF YOU THINK WE ALIGN, GO TO THE NEXT STEP!

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2

- SUBMIT THE REFERRAL FORM TO THE REGIONAL HEALTH AUTHORITY LIASION (HAL).
  - ENSURE THAT ALL FIELDS ARE COMPLETE, AND RELEVANT INFORMATION AND DOCUMENTS ARE ATTACHED.
  - THE HEALTH AUTHORITY WILL SCREEN THE REFERRAL FOR COMPLETENESS AND PROGRAM SUITABILITY.
  - IF APPROVED BY THE HAL, THE REFERRAL IS SENT TO THE PHSA ACCESS AND FLOW TEAM.
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3

ONCE WE RECEIVE YOUR REFERRAL WE WILL REACH OUT FOR FURTHER INFORMATION OR TO COORDINATE INTAKE.

FOR INQUIRIES  
PLEASE CONTACT YOUR  
REGIONAL HEALTH AUTHORITY LIASION

# Referral Tips

This referral is to be completed by a community support member or a health care team professional in collaboration with the client



- Referral package must be legible
- Preference is for electronic completion.
- Please fill in all applicable boxes.
- Complete Participation Agreement.



All referrals must include the community care team case manager who will be the point of contact to support client through and after care at treatment center.



Include ALL relevant collateral as applicable.

This may include:

- current and recent psychiatric and/or medical consults
- hospital discharge summaries
- forensic assessments
- medication administration records
- probation/bail/parole orders



Include an emergency exit plan with emergency contact person, location and transport arranged in the case of an abrupt leave from the program, or early discharge



Include aggression and violence plan of care.

Identify skills and strategies that have been helpful to alleviate past physical and/or verbal aggression



Include a safety plan.

This can be helpful if the client has had experience with suicidal ideations and/or attempts, or self harm behaviours.

FOR INQUIRIES  
PLEASE CONTACT YOUR REGIONAL HEALTH AUTHORITY LIASION