**Youth Substance Misuse Referral Form**

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| --- | --- | --- | --- | --- |
| **Name of Young Person:** |  | | **Date of Birth:** |  |
| **Name of Parent/Carer:** |  | | | |
| **Address:** |  | | | |
| **Contact Tel Number:** |  | | | |
| **Post Code:** |  | | **Email:** |  |
| **Is the young person open to or working with other Services? (i.e. Social Worker, Youth Offending, Early Help etc…)** | | **Yes/No** | | |
| **Professionals contact details:** | |  | | |
| **Permission to contact other professional?** | | **Yes/No** | | |

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| **Reason for Referral:** |

Is the young person aware of the referral: YES/NO

Has the young person/parent/carer given permission for YSM Officer to work with them/their child: YES/NO

(Please do not let lack of permission be a barrier to referring)

|  |  |  |  |
| --- | --- | --- | --- |
| **Referring Professional:** |  | | |
| **Referring Agency Address:** |  | | |
| **Date:** |  | **Contact Number:** |  |

**Please send completed referrals to: PTO**

**Youth Substance Misuse Officer Role Profile**

**Purpose**To achieve positive outcomes for young people in Cumbria through development and delivery of early help and targeted youth support, with a particular focus on health and wellbeing.

1. To engage with young people aged up to 18 who present with substance misuse needs (in particular, but not limited to, alcohol, Cannabis and New Psychoactive substances(NPS) including home visiting, working in the family setting, and detached work.
2. To act as a rapid first point contact for young people in crisis, in relation to substance misuse, who present to A&E, come to the attention of the police, or are known to other organisations through non-statutory work.
3. To act as an advisor to professionals working with young people in a statutory /formal capacity (e.g. Children in Need, Child Protection, Youth Offending Service) and, as appropriate, offer time limited direct support to the young people.
4. Deliver information and harm reduction advice, relating to substance misuse and related risk taking behaviour.

**South Cumbria North Cumbria**(Barrow and South Lakes)(Carlisle and Eden)

**Tim Field** **Abi Macrae**   
Youth Substance Misuse Officer Youth Substance Misuse Officer  
Children and Young People’s Services Children and Young People’s Services

People Children & Families

Westmorland and Furness Council Cumberland Council

Nan Tait Centre Cumbria House

Abbey Road 117 Botchergate

Barrow-in-Furness Carlisle

LA14 1LG CA1 1RD

Contact number: 07900060645 Contact Number: 07825 340514

Email: [tim.field@westmorlandandfurness.gov.uk](mailto:tim.field@westmorlandandfurness.gov.uk) Email: [abi.macrae@cumberland.gov.uk](mailto:abi.macrae@cumberland.gov.uk)

**West Cumbria**(Allerdale and Copeland)

**Barry Arnison**

Youth Substance Misuse Officer   
Children and Young People’s Services  
People  
Cumberland Council

West Cumbria House

Workington

CA14 4HB

Contact number: 0788 7947621  
Email: [Barry.arnison@cumberland.gov.uk](mailto:Barry.arnison@cumberland.gov.uk)