

South Asian Family Carers Group Learning to Manage Challenging Behaviour

- Do you have an adult relative with a learning disability?
- Is their behaviour upsetting or hard to cope with?
- Would you like to talk about new ways of managing the behaviour?
- Would you like to come to a group where you can speak your own language?



IF the answer is YES, please turn over

How to get more information

1. Ring the Merton Team for People with Learning Disabilities
Tel: 020 8545 4430
 - Ask for Psychology
2. Ring the Merton Interpreter Service
Tel: 020 8545 3927
 - Ask them to call us for you
3. Talk to your son or daughter's Day Service
4. Talk to your son or daughter's support worker
5. Talk to Merton MENCAP
6. Talk to a Social Worker or Care Manager



Sutton and Merton



MERTON COMMUNITY TEAM FOR PEOPLE WITH LEARNING DISABILITIES

ASIAN CARERS' GROUP REFERRAL FORM

NAME: _____

REFERRAL DATE: _____

ADDRESS: _____

DOB: _____

PHONE: _____

RELIGION: _____

POST CODE: _____

ETHNIC ORIGIN: _____

GP: _____

ADDRESS: _____

PHONE: _____

ARE THERE CARERS/FAMILY MEMBERS INVOLVED WHO WOULD BENEFIT FROM ATTENDING AN ASIAN CARERS' GROUP? YES/NO IF YES, PLEASE PROVIDE INFORMATION BELOW.

DO THE CARERS/FAMILY MEMBERS REQUIRE AN INTERPRETER? IF SO, WHICH LANGUAGE?

DO YOU KNOW IF THE CARERS/FAMILY MEMBERS HAVE RECEIVED PSYCHOLOGICAL SUPPORT IN THE PAST OR HAVE ATTENDED A CARERS' GROUP? YES/NO IF YES, PLEASE PROVIDE INFORMATION BELOW.

IS THE CLIENT ABLE TO CONSENT TO THIS REFERRAL? YES/NO

IF YES HOW HAVE THEY INDICATED THIS? _____

IF THE CLIENT IS UNABLE TO CONSENT, HAS THE CARER GIVEN THEIR CONSENT TO BE CONTACTED ABOUT THE GROUP? YES/NO PLEASE PROVIDE INFORMATION BELOW IF APPROPRIATE.

REFERRED BY: _____ PHONE: _____

ADDRESS: _____

RELATIONSHIP TO CLIENT: _____

KEYWORKER: _____

OTHER PROFESSIONALS INVOLVED (INCLUDE PROFESSION/ADDRESS/TEL NO):

FOR CTPLD USE ONLY:

ALLOCATED TO:

RETURN FORM TO: MERTON COMMUNITY TEAM FOR PEOPLE WITH LEARNING DISABILITIES
LONDON BOROUGH OF MERTON, 42/44 RUSSELL ROAD,
WIMBLEDON SW19 1QL

PHONE: 020-8545-4490 FAX: 020-8545-4557