



ABORIGINAL ENVIRONMENTAL HEALTH REFERRAL FORM

Explanation for the Patient / Guardian:

- The medical condition (illness) you have is preventable and may be linked to the environment in or around your home.
- With your permission, the local EH team can visit you at home to:
 - talk to you about the home environment and how it can cause illness,
 - visit your home to identify any environmental health related issues that are contributing to you being sick,
 - help you overcome or minimise those issues, and depending on your circumstances
 - fix permitted basic or emergency plumbing issues or refer to your housing provider other house maintenance issues.
- This service is free and depending on your circumstances and what the issue(s) is/are, the local environmental health team may offer to visit you in your home several times to help you.

| Presenting health concern (attributable to environmental health): | | |
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| <input type="checkbox"/> Gastroenteritis | <input type="checkbox"/> Trachoma | <input type="checkbox"/> Respiratory conditions |
| <input type="checkbox"/> Skin sores / impetigo | <input type="checkbox"/> Conjunctivitis | <input type="checkbox"/> ARF / RHD |
| <input type="checkbox"/> Scabies | <input type="checkbox"/> Otitis media | <input type="checkbox"/> MRSA / Golden Staph |
| <input type="checkbox"/> Injury / dog bite / open wound | <input type="checkbox"/> Mosquito borne (arbovirus) | <input type="checkbox"/> Worms & other Parasitic infestations |
| <input type="checkbox"/> Kidney disease (APSGN) | <input type="checkbox"/> Other (<i>please specify</i>) | |
| Additional information: | | |

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| Patient Name (<i>and Guardian details if under 18 years</i>): | |
| Patient / Guardian contact phone number: | |
| Address (<i>Community name and house number</i>): | |
| Primary house tenant contact details (<i>if not the patient / guardian</i>): | |

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|---|---|
| Referring Clinic / Health Service contact details: | EH Team: |
| Name of Referring Clinician: | Referring Clinician contact details: |
| Patient / Guardian Signature: <i>(I consent to having an Environmental Health team member visit me)</i> | Date: |



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Midwest Aboriginal Environmental Health Services

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| <p><u>Bundiyarra Aboriginal Community Aboriginal Corporation</u></p> <p>Wayne MacDonald, Manager</p> <p>board@bundiyarra.org.au</p> <p>08 9920 7900</p> <p><i>Communities:</i> Geraldton & Midwest region including Aboriginal communities of Barrell Well, Kardaloo, and Pia Wadjari</p> | <p>GRAMS Gascoyne Outreach Service</p> <p>Kurtley Moncrieff - AEH Coordinator</p> <p>kurtley.moncrieff@gos.asn.au</p> <p>08 9947 2210 or 0473 164 701</p> <p><i>Gascoyne Communities:</i> Towns of Carnarvon, Gascoyne Junction, and Aboriginal communities of Mungullah and Burringurrah</p> |
| <p><u>Yulella Aboriginal Corporation</u></p> <p>CEO</p> <p>ceo@yulella.org.au (08)</p> <p>9980 1339</p> <p><i>Communities:</i> Aboriginal community of Yulga Jinna, Buttah Windee, and towns of Meekatharra, Cue and Mount Magnet</p> | |

This document was prepared by:

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Feedback

Any feedback related to this document should be emailed to ehinfo@health.wa.gov.au