### SMOKEFREE SUPPORT SERVICE REFERRAL FORM

## Referral Pathways

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| --- |
| Te Hā - Waitaha Smokefree SupportFree face to face smokefree support **service for all Canterbury people** |

|  |  |  |
| --- | --- | --- |
|  | * Te Hā - Waitaha website – [www.tehawaitaha.nz](http://www.tehawaitaha.nz/)
 |  |
|  | * [Te Whatu Ora Smokefree SharePoint intranet site](https://cdhbintranet.cdhb.health.nz/communitypublichealth/Smokefree/SitePages/Home.aspx)
 |  |
|  | * Cortex (under “orders”)
 |  |
|  | * Scan and email to: smokefree@cdhb.health.nz
 |  |
|  | * Freephone: 0800 425 700
 |  |

## Details needed to refer

*You can add Patient Label here*

|  |  |
| --- | --- |
|  |  |
| Full name / ingoa |       |
| Address / wāhi noho |       |
| Phone / waea toronga |       |
| Date of birth |       | NHI number |       |
|  |  |  |  |

|  |  |
| --- | --- |
| **Patient agrees to Smokefree Support** | [ ]  **Yes** |
| **Pregnant** | [ ]  **Yes**  | **Due date if known:** |       |
| Pregnant whānau are eligible for the Te Hā - Waitaha Pregnancy Incentive Programme |

**Which ethnic group to do you belong to? Tick all that apply**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  NZ Māori | [ ]  NZ European | Pākehā | [ ]  Samoan | [ ]  Cook Island Māori | [ ]  Tongan |
| [ ]  Niuean | [ ]  Chinese | [ ]  Indian | [ ]  Other (e.g. Dutch, Japanese, Tokelauan)  |
| NZ Māori Iwi: |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Patient motivation**  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| *as indicated by the patient* | **Not motivated** |  | **Highly motivated** |
|  |  |  |  |
| **Notes:**  |

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| **For more information about local smokefree support services visit****www.tehawaitaha.nz** |