

FOR ORGANISATIONS, INSURERS AND CARE TEAMS

Referring through an organisation

Referral information for funded psychological therapy.

Axis works with organisational referrers where individual psychological therapy is the requested service. Brent Munro provides the clinical work and clarifies the purpose of any communication with the client and referrer.

Referral streams

WA Police and other first responders

Serving WA Police officers and staff can book 12 fully funded sessions directly, without a referral or prior approval. Further funding is discussed with the client. Other first responders should identify the employer, insurer or referral program and applicable approval process.

Veterans and Open Arms

Include the Open Arms referral or other applicable authorisation, approved services, review point and case contact. A separate DVA funding arrangement should be identified as such and checked before booking.

Workplace, EAP, insurer and community referrals

State whether the request is for therapy, clinical consultation or another defined service. Include any approval number, approved services, validity period, invoicing requirements and relevant report deadlines.

Child protection and funded youth

Identify the person with authority to consent, current care arrangements, the main care-team contact and how the young person will attend. Provide current safety information and the purpose and recipients of required reports.

Send the referral to info@axispsych.com.au

Call (08) 9520 6129 to clarify the pathway or discuss a proposed referral.

[Current workplace and funded-service information](#)

BEFORE CARE BEGINS

Referral requirements

A useful organisational referral

- The clinical question, client's goals, functional impact and relevant history.
- Current risk, existing safety plan, current supports and urgent contact arrangements.
- The client's safe contact details, preferred format, access needs and any restrictions on contact.
- Authority for referral, consent to relevant information sharing and any limits or safeguarding arrangements.
- Approved funding, number and type of services, expiry date, payer and billing contact.
- Requested reports: clinical purpose, recipient, scope, deadline and whether preparation time is funded.

Therapy and other professional roles

A therapy referral does not establish an independent assessment, fitness-for-duty, forensic or medico-legal role. If one of these services is required, describe it before an appointment is arranged so the appropriate professional role can be considered.

Care-team communication

Agree one coordination contact when several agencies are involved. Relevant changes in risk, placement, medication, functioning or the care plan should reach the treating clinician promptly. Routine updates can be brief and focused on information needed for treatment.

Funding does not give an employer or agency unrestricted access to therapy content. The client's understanding, consent, applicable obligations and the purpose of each disclosure need to be clear.

What Axis will clarify

The treatment task, appointment arrangements, funding and billing, reporting expectations and the next review point. Where an essential detail is missing, Axis will request it before the affected service proceeds.

Axis is not an emergency or after-hours crisis service. Use the appropriate crisis or emergency service for urgent care; immediate danger requires 000. Do not rely on referral email as a risk handover.