Derbyshire Mental Health Map

**Content & Submission Form**

Please return forms, fully completed to [mark.hudson@rethinjk.org](mailto:mark.hudson@rethinjk.org)

The fields marked with (\*) are mandatory fields if these are not completed your content might not appear on the map. For more information, please contact us on the email above.

**About the link and map**

The below links opens a light version of the map, you access the layers, by clicking on the arrowed white box on the top left-hand side of the blue/grey band, you can share using various social media option via the share button, also on the top of the map, the final box to the right, once pressed will give you a fuller map version.

This version divides the map in two, to the right a visual look at the placements of the map listing, this can be zoomed in and out.

To the left the legend or layers, there are 10 layers all cover different aspects of mental health, including statutory, voluntary and peer to peer support option in Derby City and Derbyshire.

The red bar on this fuller version offers a search option, if you click on the eyeglass, you can search, by themes, mental health diagnosis, area, and specific words like Menopause and this will create a list of support options, map listing first and then additional options underneath. To search for support for men, write men’s in to the search engine as this helps to define the options better.

If you click on a specific map listing on one of the layers, it opens to more specific information about that support option, and the red bar above gives you two options, to the left you go back to the full map and to the right it will give you directions to your chosen support.

Above the red bar, many of the listings will have additional information, branding, labels and posters, pictures, and guidelines, so please make sure you click on those pictures to. Any issues, updates or question please email me at [mark.hudson@rethink.org](mailto:mark.hudson@rethink.org)

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<https://www.google.com/maps/d/u/0/embed?mid=1V3Rj_vyQCpVdD_2cHQtdCh8TlIBCdMlj&ll=53.11455370088639%2C-1.2436912103701703&z=8>

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| --- | --- | --- | --- |
| Name of Group or Service (\*) | | | |
| Is your service or group already on the map?  Yes  No | Do you agree for your group or service to remain on the map?  Yes  No | | Is your service on the correct layer of the map?  Yes  No |
| Type of Submission: *The map is split into different layers of service type. Please select from the following the layer which most closely aligns with your submission:*   1. Crisis Support Service 2. Community Mental Health Team 3. Peer Support Groups 4. Helplines and Online Support and Support Groups 5. Counselling Services / IAPT 6. Free Mental Health Training 7. Voluntary Services 8. Supportive Organisation 9. Green, Outdoor and Wellbeing Activities 10. Mental Health and Wellbeing Information | | | |
| **Description of group/service (\*)** | |  | |
| **Referral Criteria: Inclusions and any exclusions** | |  | |
| For more information please call us on? or email us at ? | | | |
| Opening Times (\*)  (Days / Times) (\*) | | | |
| **Related Links**  **Please include full URLs to related websites and or any links to external content that you would like to appear with your entry on the map** | | | |
| Address / Venue (\*) This is important for map entry, if you don’t have a postal address, it is acceptable to unitise another appropriate address if agreed. | |  | |
| **Related Imagery**  Please feel free to include any related imagery to your group, organisations, service etc. If you provide any images, you will be asked to submit an additional consent form to ensure you have permission to use the images in the map. | |  | |
| **Expiry date of content**  Please state the name and contact details for the person responsible for refreshing the information submitted on this form. | |  | |
| **Tags to include with your content**  Tags are words which are used to help map users find your service more easily. These should be words that relate to your submission for example: “men’s support”, “peer support”, “debt”, “bereavement”, “older adults”, “young persons” etc. | |  | |
| If you wish to provide any logos or branding, you can send this over to [rethinkdrpss@gmail.com](mailto:rethinkdrpss@gmail.com) in **.jpeg** or **.png format**. Please send this over using the name of entry as the subject. | | | |
| **For Office Use only**: Date received: Checked by:  Uploaded date and by: | | | |

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