

Positive Ageing & Inclusion

External referral form



Eligibility for UNDER 65 years: On a DSP or not receiving the same service, and has difficulty with at least one core-activity - communication, mobility and self-care.

SEND TO: Positive Ageing & Inclusion T (08) 8375 6649
 E positive.ageing@marion.sa.gov.au 245 Sturt Road Sturt SA 5047
 Po Box 21 Oaklands Park SA 5046 marion.sa.gov.au

Name.....
 Address:.....
 Phone:.....DOB:...../...../.....
 Country of Birth.....
 Primary Language.....
 Interpreter needed Yes No
 Aboriginal/Torres Strait Islander Yes No
 Emergency contact

DWELLING

- Home Owner Public Rental
- Private Rental Strata Title
- Ind. Living Unit Other.....

LIVING ARRANGEMENT

- Alone Spouse/Partner
- Family Others

PENSION

- Aged Pension Disability Support
- DVA Gold White Carer Pension
- DVA other..... Carer Allowance
- Compensation Self funded/Super
- Other

Person is a Carer YES NO Person has a Carer Yes No

Carer/ee Co-Resident Yes No

Carer/ee Name.....

Relationship

DOB.....Sex.....Male / Female

Address.....

Phone.....

WHS/HOME ACCESS: Issues / Risks.....

Is the carer the contact person Yes No

Caring for more than 1 client Yes No

REFERRAL DETAILS

- Hospital:
- Repatriation Centre/hospital:
- Case worker:
- Mental Health Service:
- Housing organisation:
- Other:

Is the person over 65 or under 65

Has a referral been made to My Aged Care or NDIS

My Aged Care number: **AC**.....

NDIS Plan ID:

REFERRER:.....

PHONE:.....DATE:...../...../.....

Referral Date...../...../.....Discharged...../...../.....

Date of Assessment...../...../.....

Assessed by

Has Client given permission for this referral Yes No

SERVICE REQUEST:

Reasons for request:

Difficulty with Core Activity:

- Communication:
- Self-care:
- Mobility:

Physical & Mental Health Barrier:

Behaviours of concern & trigger:

Attachments: Health Summary Care Plan

Other:

CURRENT FORMAL SUPPORT:

Name of Provider:

Type of Service receiving:

Please attach any additional relevant information

OFFICE USE ONLY: <input type="checkbox"/> Eligible <input type="checkbox"/> Not Eligible
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