

VASS Community Visitor Scheme (CVS) Recipient Referral

CONFIDENTIAL

To be completed by the care provider representative

REFERRER.					
Aged Care Provider Name				Date	
Referrer's name		Position			
Email		Phone			
Please confirm you have consent to provide this information			Signature (electronic acceptable)		
CARE RECIPIENTS DETAILS					
Title	First Name	Surname		DOB	
Country of Origin		Preferred Language		Gender	
Reason for referral					
Family background eg. cultural, children, spouse					
Work background					
Hobbies and Interests					
Current visitors and relationships					
Suggested activities for volunteer visitor					
Is the Care Recipient able to participate in outings without personal care support?					

SPECIAL NEEDS GROUP. The following information is important as it will be used to better direct the care recipient to services and is requested by the Department of Social Services. The information will be kept in the strictest of confidence.

Does the care recipient identify as being from a special needs group, as specified under the Aged Care Act 1997?

Please indicate which of the below does the resident most identify with.

People from Aboriginal and Torres Strait Island Communities	
People from Culturally and Linguistically Diverse Backgrounds (CALD)	
People who live in rural or remote areas	
People who are financially or socially disadvantaged	
Veterans	
People who are homeless or at risk of becoming homeless	
Care-leavers (including Forgotten Australians, Former Child Migrants and Stolen Generations)	
Parents separated from their children by forced adoption or removal	
Lesbian, gay, bisexual, transgender and intersex people	

If you did not complete the section above, please indicate the reason below.

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Home Address			
Phone			
Emergency contact person		Relationship	
Phone (1)		Phone (2)	

HEALTH STATUS. Please include any issues that may impact on visits such as mobility, hearing, eyesight, continence, speech, dementia and/or challenging behaviour. This information is vital to ensuring a suitable match

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VISITOR PREFERENCES

Gender		Age		Language or Cultural Preferences	
Preferences for a person who identifies as being from a special needs group (refer to list above)					

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