

**Age UK Maidstone Referral Form for (Please Circle Service)  
Day Care/Bathing/Foot Care/Goodman Centre/ILS  
Personal Information Confidential**

(Office use only Ref No.\_\_\_\_/\_\_\_\_ )

Form filled out by:		Date referred:	
Referred by:		Enquiry source:	
Title:	Forenames:	Surname:	Marital status:
Address:		Tel:	Accommodation: Private Owned <input type="checkbox"/> Private Rented <input type="checkbox"/> Housing Trust <input type="checkbox"/> Council <input type="checkbox"/>
		Mobile:	
Postcode:		D.O.B.	
Lives with (E.g. Family):		Life Line:	Key Safe: Yes / No
		Gender: M / F	

**Next of Kin:**

Name:	Address:	Tel:	Relationship:
Name:	Address:	Tel:	Relationship:

Doctors Surgery:

District Nurse:	Tel:
Care Manager:	Tel:

**Medical History:**

**Medication:**


Allergies:

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**Impairments:**

Speech:	Sight:
Hearing:	Memory Loss:
Mobility:	Walking Aids:

Dietary Requirements:

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**Any Other Notes:**


## Service Information Confidential

### Bathing Details:

Bath		Shower		Bath Mat		Hot water	
Getting into bath				To dry just back/feet & legs			
Getting into water				To get into underwear			
To dry completely				To dress completely			

### Foot Care Details;

1. Special Needs	Yes/No	4. Steroids	Yes/No
2. Diabetic Diet Controlled	Yes/No	5. Client receiving chiropody at time of referral	Yes/No
3. Anticoagulants	Yes/No	6. If yes: Private:	N.H.S:
Where would the client like to be seen?		Clinic:	Dom:
Any previous ulcers		Legs: Yes/No	Feet: Yes/No

### Risk Assessment

Access to Home:	
Pets:	
Other	

### Designated Staff/Centre;

Bathing		Date client commenced	___ / ___ / ___
Foot Care		Date client commenced	___ / ___ / ___
ILS		Date client commenced	___ / ___ / ___
Day Centre		Date client commenced	___ / ___ / ___
Transport			
Walk In	Minibus	Car	Taxi
			Vol.Bureau
			Scooter

### Reason for refusal if any:

Signature of visiting Manager/Supervisor/Nurse: \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

### Have you told them about:

Foot Care	<input type="checkbox"/>
Bathing	<input type="checkbox"/>
Day Care	<input type="checkbox"/>
ILS	<input type="checkbox"/>
Goodman	<input type="checkbox"/>
Handyman	<input type="checkbox"/>
Our Services Leaflet/Booklet Given?	<input type="checkbox"/>

### Notes:

On obtaining your consent and us providing a service for you, we will keep this form on record whilst you receive a service. Our retention practice for record keeping complies with the General Data Protection Regulation and Data Protection Act 2018. and we will keep your records for **three years** from last date of entry unless you instruct us otherwise.

## Sensitive Information Confidential

### Equalities Monitoring

To support Kent County Council in their legal obligation to record equality information for all community services. We are collecting the following equalities data. This data will be used for statistical purposes and can only be shared with your written consent. At the end of the form you will be asked to sign your consent for your information to be shared which will clearly explain what information we asking to share and to whom.

<b>ETHNIC ORIGIN</b>	
<b>WHITE</b>	
British	
Irish	
Any other white background (Please specify)	
<b>MIXED ETHNICITY</b>	
White & Black Caribbean	
White & Black African	
White & Asian	
Any other mixed background (please specify)	
<b>ASIAN OR ASIAN BRITISH</b>	
Indian	
Pakistani	
Bangladeshi	
Any other Asian Background	
<b>BLACK OR BLACK BRITISH</b>	
Caribbean	
African	
Any other Black background (please specify)	

<b>CHINESE</b>	
<b>ANY OTHER ETHNIC GROUP (please specify)</b>	

<b>DISABILITY</b>	
Learning Disability	
Physical Disability	
Mental Health	
Sensory	
Other	

<b>GENDER IDENTITY</b>	
Has had	
In process of gender reassignment	
Not applicable	

**Sensitive Information (3) Confidential**

<b>RELIGION/ BELIEF OR NONE</b>	
Buddhist	
Christian	
Hindu	
Jewish	
Muslim	
Roman Catholic	
Sikh	
Other Religion or Belief	
None	
Rather Not Say	

<b>SEXUAL ORIENTATION</b>	
Same Sex	
Opposite Sex	
Bi-Sexual	
Rather Not Say	

**Consent**

In order to help you we need to store information about you. The information will be stored in secure cabinets and on Age UK Maidstone's database. The law says that we must get your consent to do this. Everything you tell us will be treated confidentially.

I consent to Age UK Maidstone recording personal information (1) about me and to forward this to other agencies to help to support me.

Name: .....

Address as above

I have been informed of Age UK Maidstone's Confidentiality Policy.

Signed:..... Date:.....

In order to provide statistical reports to our partners we need your consent. From the personal information (1) we would only share that does not include your full name, address and Telephone number. From the service information (2) we would only share the named services that you use and from the sensitive information (3) we would only share your answers.

I consent that Age UK Maidstone can share information with partners for statistical purposes only. I understand that currently this information is only provided to Kent County Council and Golding Homes (only applies to Golding Homes residents). I have been informed that if information is requested by other partners I will be informed and I can choose for my information not to be shared with these partners and this will be recorded on my client file.

Signed ..... Date.....

## Confidentiality Policy

We believe in the right of privacy and the need to respect our clients, staff and volunteers. We want people to have trust and confidence in Age UK Maidstone, so that they feel welcome and relaxed. This policy does not guarantee absolute privacy, or encourage secretiveness, but aims to create and maintain an environment where personal dignity and individual rights are respected.

Confidentiality applies to all staff, volunteers and clients encompassing:

- all records and information about clients, volunteers and staff
- any information exchanged in a formal or informal setting where it is deemed sensitive by the individual concerned
- information about the internal affairs of Age UK Maidstone

We will ensure that:

- 1) The records of volunteers, clients and staff will be kept in a safe place. These records will be accessed only by those who need to see them, in order to run a quality service, or by the individual themselves. In practice this means:
  - 1.1 Staff records are only accessible to the Chief Executive Officer, Deputy Chief Executive Officer and the individual Staff member concerned.
  - 1.2 Volunteer records are only accessible to the Chief Executive Officer, Deputy Chief Executive Officer, Volunteer's Line Manager, Administrative Staff and the Volunteer.
  - 1.3 Client's records are only accessible to the Chief Executive Officer, Deputy Chief Executive Officer, Administrative Staff and Support, the Clients Services Provider and the Client on request
  - 1.4 All service user files will be kept for 3 years after the end of service, in line with CQC guidelines.
  - 1.5 All personal information kept on the computer will be password protected.
- 2) Only necessary information will be collected. The purpose of collection will be made clear to the individual concerned and information will only be used for that purpose.
- 3) Nothing learned about clients, volunteers or staff will be implied or passed to anyone without the person's consent. This includes information learnt in an informal setting

- 4) Clients, volunteers and staff have the right to complain about breaches of confidentiality through the complaints/grievance procedure.
- 5) Breaches in confidence will be taken seriously and may result in dismissal of the offending person, whether a user, volunteer or staff member.
- 6) The importance of confidentiality and its implications will be part of the volunteer/staff induction process and part of welcoming a client to our services. Everyone will receive appropriate written information about confidentiality.
- 7) On receiving any information, it is important that we recognise our own prejudices and control these when dealing with information. Our prejudices must not affect the confidentiality that must be given to information.
- 8) Service users should be informed of their right to access any information that is held in our files. Furthermore, copies of any paperwork such as letters may be given to the service user but the original should remain in the file.

## **Exceptions**

Information may only be disclosed without the permission of the person concerned if:

- Disclosure is required by law e.g. Police investigation of theft or suspicious death
- In circumstances of serious abuse or where there is a strong likelihood harm will come to that person (including self-harm) or other matters of similar significance
- A person is felt to lack the mental capacity to make a decision. In such a case 'implied consent' may be used to take action in the person's best interest. Such an incident must be recorded and reported.
- Any unauthorised breach of confidentiality by personnel will be viewed as disciplinary matter up to and including dismissal.

In such cases, you must only disclose the information to the Chief Executive Officer or their Deputy in their absence, who will decide what action to take.

The service user should be given the reason why and to whom the information will be passed. Where this is not feasible for reasons of safety it should be discussed with the Chief Executive Officer.

The minimum amount of disclosure possible will be expected in any such situation by anyone involved.



**Consent**

Here at Age UK Maidstone we take your privacy seriously and will only use your personal information to administer your account and to provide the products and services you have requested from us.

In order to help you we need to store information about you. The information will be stored in secure cabinets and on Age UK Maidstone’s database. The law says that we must get your consent to do this. Everything you tell us will be treated confidentially.

I consent to Age UK Maidstone recording personal information (1) and sensitive information (2) about me. **Yes**  **No**

I have been informed of Age UK Maidstone’s Confidentiality Policy.

In order to provide statistical reports to our partners we need your consent. From the personal information (1) you provided we would only share data that does not include your full name, address and Telephone number. From the service information (2) we would only share the named services that you use and from the sensitive information (3) we would only share your answers.

I consent that Age UK Maidstone can share this information with Kent County Council for statistical purposes only. **Yes**  **No**

**For Golding Homes Residents only.**

*I consent that Age UK Maidstone can share this information with Golding Homes for statistical purposes only. **Yes**  **No***

I have been informed that if information is requested by other partners I will be informed and I can choose for my information not to be shared with these partners and this will be recorded on my client file.

From time to time we would like to contact you regarding:

With details of other services, we offer as Age UK Maidstone; **Yes**  **No**

Client satisfaction surveys on our performance; **Yes**  **No**

Copies of our quarterly newsletter; **Yes**  **No**

Fundraising activity such as our Christmas and summer raffles; **Yes**  **No**

If you consent to us contacting, you for these purposes please tick to say how you would like us to contact you:

**Post**  **Email**  **Telephone**  **Text message**

Name: .....

Address as above

Signed .....

Date.....