(Office use) Charity Log no:

**Reconnect - Peer to Peer Connections - self-referral form**

*Age UK South Gloucestershire offers our Reconnect service to support older people (50+) experiencing isolation and loneliness and facilitate them in connecting with others in their community. The Reconnect service will match you with another like-minded individual for social visits or outings. This could be for a regular cup of tea and a chat, or maybe you would like to attend an exercise class or club and would appreciate a friendly face to go with you. Due to the nature of the service, we can't guarantee a perfect connection, but we hope you will find someone with whom you can socialise. If for any reason, however, it doesn't work out, we are always happy to add you back to the database and look for a new connection.*

Please complete all sections of the form.

|  |
| --- |
| **Personal Details** |
| **Title:** |  |
| **Forename:** |  |  **Known as:** |  |
| **Surname:** |  |
| **Todays Date:** |  |
| **Address:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Date of Birth:** |  |
| **Preferred Pronoun:** | He/Him |[ ]  She/Her |[ ]  They/Them |[ ]
|  |
| **Processing your data** |
| In order to run the Reconnect service, we need to store information about our clients. The law says that we must get your consent to do this. Everything you tell us will be treated confidentially, and your data will be treated in accordance with our Data Protection & Confidentiality Policy.  |
| **I consent to Age UK South Gloucestershire recording personal information about me:** | Yes |[ ]  No |[ ]

|  |
| --- |
| **Who is completing this form** |
| **Are you completing this form for yourself?**  | **Yes** |  | **No** |  |
| **If no, who is completing the form?**  |  |
| **What is your relation to the individual being referred?** |  |
| **Please sign to confirm you have consent on the individual being referred behalf to complete this form:** |  |

|  |
| --- |
| **Emergency contact**: Please can you provide details of a next of kin or emergency contact. This will be used in line with our Data Protection Policy and will be kept by our team in case of an emergency.  |
| **Name:** |  |
| **Relationship to you** (e.g. wife, son or friend)**:** |  |
| **Telephone number:** |  |
| **Address:** |  |

|  |
| --- |
| Age UK South Gloucestershire offers the Reconnect service to help alleviate feelings of isolation and loneliness. To assess the impact of the service over time, we use several measures to which we will ask for your responses at regular intervals.**As such, please record your response to the following statements:** |
|  | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| I am content with my friendships and relationships |[ ] [ ] [ ] [ ] [ ]
| I have enough people I feel comfortable asking for help at any time |[ ] [ ] [ ] [ ] [ ]
| My relationships are as satisfying as I would want them to be |[ ] [ ] [ ] [ ] [ ]

**We like to keep in regular contact with those using our services and periodically produce newsletters. How would you like to receive them?**

|  |
| --- |
| **Topic** |
| **Service User** | **By email?** | Yes [ ]  | No [ ]  | **By post?** | Yes [ ]  | No [ ]  |
| **General** | **By email?** | Yes [ ]  | No [ ]  | **By post?** | Yes [ ]  | No [ ]  |

**Equality and Diversity Monitoring**

Age UK South Gloucestershire aims to provide equal opportunities and fair treatment for all staff, volunteers and service users. We would like you to complete this form in order to help us understand whom we are reaching and to better serve everyone in our community. The information will be used to provide an overall profile analysis of our staff, volunteer and service user base and will be kept anonymous.

|  |
| --- |
| **Age** |
| Date of Birth |  | I prefer not to say |[ ]

|  |
| --- |
| **Do you consider yourself to be a carer?** |
| Yes |[ ]  No |[ ]  I prefer not to say |[ ]
| If yes, on average, how many hours a week are spent caring? | Under 50 |[ ]  Over 50 |[ ]

|  |
| --- |
| **Do you describe yourself as Disabled?** |
| Yes |[ ]  No |[ ]  I prefer not to say |[ ]

|  |
| --- |
| **Ethnicity**Please state what you consider your ethnic origin to be. (Ethnicity is distinct from nationality, and the categories below are based on the 2011 Census in alphabetical order.) |
| **Asian** | **Black** | **Chinese or other ethnic group** |
| ☐ Indian | ☐ Caribbean | ☐ Chinese |
| ☐ Pakistani | ☐ African | ☐ Any other ethnic group (please detail) |
| ☐ Bangladeshi | ☐ Any other Black background (please detail)  |
| ☐ Any other Asian background (please detail) |
| **Mixed** | **White** |
| ☐ White and Black Caribbean | ☐ English |  ☐ Any other White background (please detail)  |
| ☐ White and Black African | ☐ Irish |
| ☐ White and Asian | ☐ Scottish | ☐ I prefer not to say |
| ☐ Any other mixed background (please detail)  | ☐ Welsh  |

|  |
| --- |
| **Gender** |
| Female |[ ]  Male |[ ]  I prefer not to say |[ ]
| Does your gender identity match your sex as registered at birth? | Yes |[ ]  No |[ ]

|  |
| --- |
| **Religion/ belief** |
| ☐ Buddhist | ☐ Sikh |
| ☐ Christian | ☐ Other (please state) |
| ☐ Hindu |
| ☐ Jewish |  ☐ No religion |
| ☐ Muslim |  ☐ I prefer not to say |

|  |
| --- |
| **Sexual Orientation** |
| ☐ Bisexual | ☐ Heterosexual |
| ☐ Lesbian/Gay woman | ☐ I prefer not to say |
| ☐ Gay man |
| ☐ Other (please state)  |

Please return this form (NO STAMP NEEDED) to:

Freepost RTEX-ERLY-HUYS

Age UK South Gloucestershire

67 High Street

Thornbury

Bristol

BS35 2AW

**Or via email to:**

reconnect@ageuksouthglos.org.uk