

CALL & CHECK

Referral form



Client details*		
Title:	Surname:	Forenames:
DOB:		Gender:
Address:		Telephone number:
Postcode:		
Name of emergency contact or key holder:		Emergency contact telephone number:
Relationship:		
Service needs		
Days of the week visits are required: Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>		
Please tick any of the following that apply to the client:		
<input type="checkbox"/> Living alone <input type="checkbox"/> Socially isolated or lonely <input type="checkbox"/> Caring for someone <input type="checkbox"/> Recently out of hospital or experiencing significant change to their daily living arrangements	<input type="checkbox"/> Living away from their family and friends <input type="checkbox"/> Recently bereaved <input type="checkbox"/> Isolated from their immediate community due to physical disability or health problems <input type="checkbox"/> Assessed as benefiting from the service <input type="checkbox"/> After panic button use	
Please give any further relevant supporting information regarding this referral:		
Referrer details		
Referrer name:		Telephone number:
Job title:		Email address:
Organisation:		Address:

Call & Check visits are made by Jersey Post Limited postal workers and in no way replace the need to see your doctor or other care providers. If a postal worker cannot get hold of you and has concerns, they will inform a senior manager who oversees the Call & Check service, and their manager will endeavour to contact your emergency contact to check on your well-being. Please ensure you have permission from your emergency contact to nominate them for this role, and be sure to let us know if their details change.

Client signature _____ **Date** _____

Data Protection

Jersey Post is committed to ensuring your information is handled properly. In signing up to the Service, you, the client understands that we will collect and retain the details overleaf to enable us to manage the Service. All information you provide will be handled in accordance with the Data Protection (Jersey) Law 2005 (as amended). Only authorised personnel will have access to your information and it will be held securely in accordance with the said law. Your signature above provides Jersey Post with consent to retaining these details. Your information will be processed in compliance with the Data Protection (Jersey) Law 2005 for the purposes of the Service.

*Jersey Post Limited reserves the right to refuse any person the service or cancel the service at any time upon five working days notice.

Form returns and queries:

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