

Eagleton Ridge Respite Centre

10 Six Mile Road
Eagleton, NSW, 2324

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Application for Respite Accommodation

Please note: The Centre must receive this application before Respite Accommodation can be finalized.

This information is to be kept private and confidential. This information is for assessment of support requirements & to make transition into the Centre easier for all. This information is to be used also for activity planning. Please answer all questions as accurately as possible to enable us to build client profiles for better management of groups - more information is better than not enough.

Applicants Full Name: _____ D.O.B _____

Likes to be addressed as: _____

Applicants Home Address: _____

Contact Phone Number: Home _____ Business _____ Mobile _____

Emergency Contact Number: _____

Next of Kin: Name: _____ Relationship to applicant _____ Contact No: _____

Person 1 for contact: Name: _____ Phone: Home _____ B/M _____

Person 2 for contact: Name: _____ Phone: Home _____ B/M _____

Local Doctor: Name: _____ Phone: _____ A/hours contact: _____

Allergies: _____

Fears/Phobias and management:

Medical Conditions: Please indicate any recent treatments or medication changes.

Medications: All medication must be in a Webster Pack. Please also indicate if Panadol can be taken.

Special Diet requirements: Please indicate how much tea/coffee applicant usually drinks.

Special Instructions:

Support requirements:
Sleeping pattern: Please include usual times of getting up and going to bed.

Personal Hygiene:
Shower / bath - independent
- requires minimal assistance - Please detail assistance required

Toilet Hygiene - independent

- requires assistance - Please detail assistance required _____
•night incontinence _____ bowel
habits _____
•

Dress - independent _____, Requires minimal assistance - Please detail assistance required _____

Housekeeping: Please answer each statement

Able to make own bed _____

Able to tidy room _____

Able to tidy bathroom _____

Able to help wash up _____

Able to join in cooking activities with assistance _____

Farm Activities:

Likes/Dislikes - animals, Likes/Dislikes - outside activities, Likes/Dislikes - gardening

Indoor Activities: Likes _____

Dislikes _____

Sports: Likes _____

Dislikes _____

Hobbies: _____

Regular Activities: _____

Social Outings: Likes _____

Dislikes _____

Socialization with Peers - Please indicate if applicant has difficulties with integrating with others - _____

Please indicate if client drinks alcohol at social events e.g. Beer at the Disco: _____

Existing Support Services: _____

Existing programs:

Working: _____

Training _____

Behavioral _____

Environmental _____

Proposed Respite Booking Dates: _____

Please ensure all items brought to the Centre are marked with name.

All care will be taken but no responsibility for clients property.

Clients are expected to take care of own belongings. Please ring us if any belongings are lost or if you end up with items that do not belong to you.

All medications are to be in Webster packs.

Meals, snacks and cordials will be available but the Centre will not provide soft drinks.

Toiletries, soaps, shampoos, personal hygiene products e.g. pads, razors, & sunscreen are NOT supplied by the Centre. If applicant required toiletries they will be purchased from their spending money.

All linen including towels are supplied.

Access to computer and computer games is available but clients are not to use any computer discs other than those from this Centre.

If calling client at the Centre we ask that calls are made between 8am and 9pm unless otherwise arranged.

Please confirm with Centre approximate pick up and drop off times 24 hours prior to book in date.

Please ensure Centre is notified of any changes in treatments, medications, diets etc. on any further bookings.

Please Note: All photographic materials remain the property of ERRC for use with promotional advertising unless otherwise arranged with ERRC.

Please do not hesitate to ring me on 02 49871686 for any queries or further information.

Thank you for your application & we hope we can assist you with Respite Accommodation.

Belinda Furlonger & Vince Furlonger