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| Wolverhampton Telecare Service  Referral Form for Professionals |

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| **Referrer Details** | |
| **Date** |  |
| **Referrers Name** |  |
| **Referring Team** |  |
| **Contact Telephone Number** |  |

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| **Give reasons why Telecare is required** | |
| **Support a reablement**  **programme** | **Reduce the risk of hospital**  **admission or readmission** |
| **Reduce the risks of**  **admission to care home** | **Facilitate a hospital**  **discharge** |
| **Promote customer**  **independence** | **Support Carer** |

**If the person is away from home at the point of referral give the date of return home**

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| **Customer Details** | | | |
| **Title** |  | **Date of Birth** |  |
| **Name** |  | **Ethnicity** |  |
| **Address & Postcode** |  | | |
| **Tel Number** |  | | |
| **GP Name**  **Surgery Name & Address** | | | |

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| **Customer Medical/Disability/Health Information** |
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| **What is the reason for Referral** |
| **Is the referral for a Basic Alarm Package?**  Yes  No  *The person must be capable of pressing a trigger/button to summon assistance in the event of an emergency.*  ***1 Alarm Unit linked via the landline telephone to a 24-hour control centre***  ***1 Pendant or 1 Falls Detector (the person will not require both)***  ***Up to 2 Linked Smoke Detectors***  ***Key Safe***  **If you require other Telecare equipment detail your concerns and what outcomes you aim to achieve.** |

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| **Provide details of who to contact to arrange installation if not the customer** | | | | |
| **Name** | **Address** | **Tel No** | **Relationship** | **COMMENTS**  **IF ANY** |
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| **Who needs to respond to the person in the event of an emergency** | | | | | | | | | |
| Does the person accept a responder may visits in the event of an emergency? Yes  No  List below the names of people who need to be contacted in the event of an emergency and what part they will take:-  **NOK**  – Next of Kin  **EC**  – Emergency Contact Only  **KH**  – Is a Key Holder  **RES** – Is a responder and able to go and check on the person in an emergency | | | | | | | | | |
| **Title** | **Name & Surname** | **Relation-ship** | **Address with Postcode** | **Telephone Numbers** | | **N**  **O**  **K** | **E**  **C** | **K**  **H** | **R**  **E**  **S** |
|  |  |  |  | **Home** |  |  |  |  |  |
| **Mobile** |  |
| **Work** |  |
|  |  |  |  | **Home** |  |  |  |  |  |
| **Mobile** |  |
| **Work** |  |
| **Comments** | | | | | | | | | |

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| **Property Details** |
| **Tenure**  Council  Private  Housing Association  **Property Type**  Bungalow  House  Prefab  Maisonette – please mention Floor  Flat – please mention Floor  **Does the person live alone?**  Yes  No  **Does the person already have a Community Alarm service in place**  Yes  No  **E.g. Carelink?**  **Is there a modern working telephone socket in place?**  Yes  No  **Is there a 13 amp socket within 3 metres of the telephone which could be reached without crossing a doorway or causing a trip hazard?**  Yes  No  **Are Telecare equipment alerts to be directed to a control centre?**  Yes  No  **Are Telecare equipment be directed to a carer/family in the same house?**  Yes  No  **Does the property have shared access to the building?**  Yes  No  *A keysafe is provided to enable access to the property in the event of an emergency. A key must be available on the day of installation to be placed into the keysafe on order to access the property quickly in the event of an emergency by an emergency responder service.*  **Is a Keysafe already in place** Yes  No |

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| **Have charges been discussed with the customer?**  Yes  No  **See reverse for more information on charges** |

For all NHS sector workers, referrals should be sent to

[telecare@secure.wolverhampton.gov.uk](mailto:telecare@secure.wolverhampton.gov.uk)

All other referrals to be sent to

Wolverhampton Telecare Service

Wolverhampton Homes, Parkfields, Wolverhampton, WV2 2HH

Email [telecare@wolverhamptonhomes.org.uk](mailto:telecare@wolverhamptonhomes.org.uk)

Office 01902 553585

**Telecare Charges**

**Telecare is also provided free of charge for up to 6 weeks to facilitate a hospital discharge home, reduce the risk of hospital admission or to support a period of reablement.**

A Telecare service is provided to anyone that is currently receiving care and support through Wolverhampton Council and forms part of their assessed charge.

The Service is also provided free of charge to people in receipt of at least one of the following benefits only **without** additional disability benefits (i.e. Attendance Allowance/Disability Living Allowance/Personal Independence Payment).

If known tick what benefit the person is in receipt of:

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| Pension Credit (Guaranteed) |  | Maximum Housing Benefit |  |
| Attendance Allowance (AA) |  | Maximum Council Tax Reduction |  |
| Income Support |  | Disability Living Allowance (DLA) |  |
| Income-related ESA |  | Personal Independent Payment (PIP) |  |
| Universal Credit (below established threshold) |  | Form DS1500 (prognosis of less than six months to live) |  |

If an individual is in receipt of Attendance Allowance/DLA/PIP, the standard charge will be applied for the relevant level of service (irrespective of whether the individual is in receipt of the benefits listed above or not)

All other people living in Wolverhampton can access the Telecare Service for a weekly charge.

The Telecare Service levels are as follows:

**Level 1 (£3 per week):**

The standard Telecare service comprising of an alarm unit, pendant, keysafe and smoke detector. This service level is available to people who have two responders who hold a key to their property and agree to respond to an emergency at any time. They could be a family member, neighbour or friend.

**Level 2 (£5 per week):**

As Level 1, but including access to the mobile responder service provided by St Johns Ambulance will visit the Telecare customer’s property as required.

**Level 3 (£7 per week):**

As Level 1, but with a range of additional Telecare detectors and sensors appropriate to the customer’s needs. Like Level 1, this service is available to people who have two responders - either a family member, neighbour, carer or friend - who agree to respond to an emergency call as required.

**Level 4 (£9 per week):**

As level 3, but with access to the mobile responder service provided by St Johns Ambulance.