

Carers Short Breaks - Harlington Care Referral Form

Carer referred	
Person with care support needs	
Date of referral	

Person making the referral

Name	
Job title/Organisation	
Address	
Contact Tel number	
Email	

Important information from referrer e.g. particular factors & risks, communication needs (including if in a format other than written English is needed)

Identified risks to staff? Lone working concerns? Any associated risks to / from the client?
History of physically challenging behaviour? Allergies? Any safeguarding concerns

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Clients seeking free Carer's Short Breaks need to be referred from their Social Worker directly to Harlington Care, having completed a Carers Assessment.

Services in the meantime can be purchased using Direct Payments or by self-funding.

Details of Carer receiving the Short Breaks support

Mr/Mrs/Miss/Ms	First name:	Surname:
Preferred name		
Date of birth		
Address		
Gender		
Telephone numbers:	Home:	Mobile:
Email		
Preferred method of contact		
Language (incl. preferred verbal & written)		
Interpreter needed	YES/NO	
LAS Identifier Number		

Carer's wishes, preferences and desired outcomes

What matters to the carer? ►

How will this break make a difference to the carer?

Carers strengths and how could use these to help them in life?

Include any strengths the carer has, has potential to develop or can be supported in developing or accessing

Other relevant information

Other things to consider.

Please email this form to Harlington Care: info@harlingtoncare.org

Contact number: Office: 01895 258888