**Technology Enabled**

**Supports Self-Referral Form**

Title: Secondary key holder name:

Name:

Address: Secondary key holder address:

Post Code: Telephone Number:

Date of birth: Relationship to you:

Telephone Number: Third key holder name:

Other telephone number:

Third key holder address:

Name of GP (family doctor) surgery:

Telephone Number:

GP address: Relationship to you:

GP telephone number:  **Property details**

**You must have 3 local key holders or**

**2 local key holders and a key safe in situ. Please tick which one applies:**

South-Ayrshire council tenant

Private tenant

Sheltered Housing

Other

**A key holder is someone that you trust**

**to hold a spare key for you. They need**

**to be available 24 hours per day and live**

**no more than a 15 minute drive from**

**your home.**

Primary key holder name:

Primary key holder address: **Do you have a key safe?**

Yes No

Telephone Number:

Relationship to you:

**Falls information If you are referring on behalf**

**Have you had a fall in the last 12 of someone else, what is your**

**months? relationship to the person?**

Yes No

**family member**

**Have you fallen more than once in**

**the last 12 months? health professional**

Yes No **power of attorney (POA)**

**Do you have unsteadiness on your feet welfare guardian**

**or have difficulties with your walking**

**or balance?** Name:

Yes No Address:

**Has the referrer observed any**

**unsteadiness or difficulties?**

Telephone Number:

Yes No

**Did you experience a blackout when** If youdo not have POA or welfare

**you fell or did you find yourself on** guardianship you must have the

**the ground and didn’t know why?** person’sconsent that you are referring.

Yes No A charge of £4.41 per week is

applicable for this service. The cost will

**Have you had any difficulties carrying** be reviewed on a yearly basis.

**out your usual activities since you**

**fell?**

Yes No

**Please add any additional information**

**below.**

**Please return to:**

**Telecare,**

**10 Wellington Square**

**Ayr**

**KA7 1HL**

**Tel. 01292 880929**

**Note: it is essential to have a landline**