

Referral: Footprints Community – Social Health Connect (SHC)

SHC eligibility criteria (will have to meet <u>all the</u> below, please tick):	
<input type="checkbox"/>	Aged 18 years or older
<input type="checkbox"/>	Experiencing social isolation and loneliness (defined as: people who, at least some of the time, feel they lack companionship, left out and isolated from others)
<input type="checkbox"/>	Residing in the Caboolture, Redcliffe or Kilcoy region
Consent	
Is the client aware of this referral?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the client consent to the referral?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Client information	
Date:	
Given Name:	Family Name:
Date of Birth:	Gender:
Pronouns (if applicable):	Country of Birth:
Residency: <input type="checkbox"/> Australian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Visa/ Other:	
Culturally and Linguistically Diverse: <input type="checkbox"/> Yes <input type="checkbox"/> No Cultural Background:	Interpreter Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Languages spoken at home:	
Aboriginal or Torres Strait Islander?	
<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Aboriginal and Torres Strait Islander
<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Australian South Sea Islander
<input type="checkbox"/> None of Above	<input type="checkbox"/> Not Stated
Contact Details:	
Mobile:	Landline:
Email:	Preferred Method of Contact:
Comments regarding contact:	



Client street Address:	
Suburb:	Postcode:
Safety issues: <input type="checkbox"/>	Comments:
Reasons for Referral:	
Other health practitioners/ key persons involved in care:	
NDIS: Yes <input type="checkbox"/> No <input type="checkbox"/>	My Aged Care: Yes <input type="checkbox"/> No <input type="checkbox"/>
Psychosocial Risk Factors/Barriers to social engagement (social, physical, environmental):	
Referrer Details:	
Organisation:	GP Practice:
Type of Service:	
Name:	Role:
Phone:	Email:
Relationship to client:	
To send a referral or contact our team:	
Email: shc@footprintscommunity.org.au Phone: 07 32523488 Fax: 07 3252 3688 Medical Objects: SF4006000X1	