

Booking Form**Glenbrook Rest Home**

Name:		Date:		NHI (if known):	
Middle Name:		DOB:		Age:	
Address:		Type of Care Required: Long Term Respite			
Current Facility:		NASC Needs Assessment Completed? Yes No		Has NASC Respite or Carer Support been Approved? Yes No	
Ethnicity:		Sex: M F		No. of Days:	
Doctor:		Referred by:		Long Term Funding Status:	
Phone:		Reason for Enquiry:		Subsidised Private Paying	
<u>Contact 1</u>			<u>Contact 2</u>		
Name:		Phone:	Name:		Phone:
Relationship:		Mobile:	Relationship:		Mobile:
How did you find out about GBRH?					
Mobility: Walker Walking Stick No Aid			Needs Assessor:		
Current Wounds/Fractures:			<u>Current Medications</u>		
Continence Pads? Type?					
Dementia? Wandering?					
<u>Medical/Surgical History</u>			<u>Notes: Waiting for when room is available</u>		
Heart:					
Gastric:					
Diabetes:					
Other:					
Allergies:					
Continue on Back if Necessary					
Completed by:			Designation:		
Date:			Signature:		

Notes - Continued

Admission Considerations

Unable to Do

Realistic Resident Objectives and Goals

Priority

Waiting List

Local Community

Availability of Bed

Short or Long Term Stay

ADLs

Workload

Time

Equipment

Continence Management

Medication

RN Input

Medical Input

Nutrition

Supervision

Safety

Staff Skill Mix

Facility

Resident Mix

Gender

Environment

Cultural

Social Norms

Spiritual

24 Hour Hands on RN Care

Two Person Care

Acute Palliative Care

Secure Environment

Restraint

Specialist Care

Continuous Oxygen

Tube Feeding

Suctioning

Specialist Wound Dressing

Specialist Medication

IV Therapy

Hands on Specialist Care

Physiotherapist, Speech Therapist, Radiology

Oncology, Occupational Therapist, Laboratory

Special Dietary Requirements

Special Equipment

Double Incontinence

Isolation

Wandering/Touching

Aggression

Disturbing Behaviour

Anti Social Behaviour

Sexually Inappropriate Behaviour

Non Compliance

Incontinence - Inappropriate Places

Restraint

Seclusion

Language

Dietary

Resident Mix

Goals and Expectations