

CLIENT REFERRAL FORM

Seniors' Community Connector Social Prescribing Program

Please review the Referral Guide on back of form for program description, referral criteria and examples of non-clinical services. If you have any questions, please contact the Seniors' Community Connector at 604-885-4088 or <u>scc@resourcecentre.ca</u>.

Section 1: Client Information							
Client's Name (First and Last Name):	Gender:	Date of Birth:	Phone:				
		DD/MM/YYYY	Email:				
Address:	City:	Province:	Postal Code:				

Section 2: Reasons for Referral

Referral Date (DD/MM/YYY):

Please identify the area of support the patient would like help connecting with (examples on back):

Physical Activity Programs	
Nutrition/Food Programs	
Social Programs & Services	
Caregiver Programs	
**Are there any restrictions or lim	itations to be aware of?

Section 3: Referral Source Information

(Please do not fill out this section if you are a client and/or self-referring.)

Name:	Relationship to	o Client:		Agency (if applicable):		
Phone:	Email:	Do you require notice of intake and assignment?		Yes	No	
Please confirm that the client has consented to this referral:		Yes	No			
If not, please explain:						

Statement of Confidentiality: The Social Prescribing Program respects the privacy of our program participants. All records dealing with Social Prescribing Program participants will be treated as confidential and will not be distributed outside of the organization without the program participant's written consent.



107A – 5710 Teredo Street, PO Box 1443 Sechelt, BC, V0N 3A0 Tel: 604-885-4088 | Fax: 604-741-6202 | <u>scc@resourcecentre.ca</u>

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Seniors' Community Connector Social Prescribing Program

Program Description:

The Social Prescribing Program supports seniors to access non-clinical, community-based services to prevent or delay frailty by fostering resilience and social support using a comprehensive, strength-based approach. Participants of social prescribing programs have reported improvements to health and wellbeing, health-related behaviour, emotional state, social contacts and day-to-day functioning. When a health care provider identifies a patient who could benefit from the program they can send a "prescription" to the Seniors' Community Connector who will support the patient to access suitable local sources of support.

Referral Criteria:

Seniors living in the Lower Sunshine Coast area who are experiencing: • social isolation • emotional problems • major life events such as loss of a spouse • chronic diseases • physical inactivity • poor nutrition and/or food security concerns • poor health outcomes associated with social determinants of health (low income, Indigenous/Métis/Inuit, etc.) • frequent use of primary health care.

Examples of non-clinical community support services:

Physical Activity Programs

Walking groups, chair yoga, Aquafit, Steady Feet, activity centre recreational programs.

Nutrition/Food Programs

Social meal programs, Meals on Wheels, volunteer shopper programs, food banks and food security programs.

Social Programs & Services

Art classes, book clubs, coffee clubs, knitting groups, community centres, mental health services and support with applications for HandyDart, adult day programs, and affordable housing.

Caregiver Programs

Support groups, educations sessions, one-to-one support.

What does the social prescription program look like in practice?



SENIOR WITH COMPLEX NEEDS



REFERAL MADE BY A HEALTH CARE PROFESSIONAL, FAMILY, OR FRIEND TO SENIOR'S COMMUNITY CONNECTOR SENIORS' COMMUNITY CONNECTOR LINKS SENIOR TO NON-CLINICAL, COMMUNITY-BASED, HOLISTIC ALTERNATIVE SOURCES OF SUPPORT



SENIOR IS CONNECTED TO APPRORIATE COMMUNITY SERVICES, PROGRAMS AND SUPPORTS



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