

HRCS Happenings



Term 2, Week 3

17 May 2019

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Principal: Tracey Rapson Assistant Principals: Amanda Worton - John Winters - Natasha Brown/Jackie Bright (Rel)

Principal's Message

Dear families and friends

I hope everyone had a lovely Mother's Day with family and friends!

Mother's Day High Tea: On Monday we hosted our inaugural Mother's Day High Tea. Several mums, families and students enjoyed the High Tea delicacies whilst networking and sharing stories. Well done to Mandrill Room who decorated our hall beautifully, it was a vision of pink. Thank you to Tash and her team for coordinating the event: I'm sure it will become a regular event on our school calendar. I would like to sincerely thank all those who attended on Monday: we hope that you enjoyed the experience!

Companion Cards: Are you aware that your child may be eligible for a companion card? Below is some information about the program and the application form is attached. Companion cards can be used in the community and can sometimes be used on school excursions.

What is the Companion Card? The Companion Card program is a not for profit program funded by the NSW Government.

A Companion Card is for people with significant and permanent disabilities that need a carer with them at all times to participate in community based activities and venues. It aims to promote the rights of people with disability to fair ticketing and make community access and participation more affordable.

The card itself is the size of a credit card, with the name and a photo of the holder — who is the person with disability. When the holder buys a ticket for themselves at selected venues and facilities around NSW, their companion will get free entry.

Companion Cards are not means tested and those assessed as eligible have the card for life.

Who is the Companion Card for? To be eligible for a NSW Companion Card, the applicant must:

1. Be an Australian citizen or resident, and live in NSW
2. Have a significant and permanent disability
3. Demonstrate that, due to the impact of their disability, they would be unable to participate at most community venues or activities without attendant care support
4. Demonstrate that the use of aids and other technologies does not meet their attendant care support needs
5. Demonstrate that their need for this level of attendant care will be life-long

Dates For Diaries

2019

Tuesday 14 May School Photos
Wednesday 29 May Giraffe Room Excursion
** Wednesday 29 May ** P&C Meeting @6.30pm
Friday 7 June Grandparents Day 210am
Friday 5 July End of Term 2
Monday 22 July Staff return for Term 3 2019
Tuesday 23 July Students return for Term 2 2019
Wednesday 14 September Year 7 & 10 Vaccinations
Friday 20 September Footy Colours Day
Friday 27 September End of Term 3 2019
Monday 14 October Staff & Students for Term 4 2019
Wednesday 18 December Last day of Term 4 for Students

P&C Election BBQ Tomorrow at Metford Public School. Hope to see you there!

We are Safe - We Learn - We Care



The Companion Card is not issued to every person who has a disability. The card is issued to people who can demonstrate that they would not be able to participate at most venues and activities without a companion, and that this need is life-long. A Companion Card cannot be issued if the applicant may become independent in the future as a result of treatment or management, training, recovery or developmental improvements. A Companion Card can only be issued when an ongoing need for a companion can be demonstrated.

What is Attendant Care Support? Attendant care includes significant assistance with mobility, communication, self-care or planning where the use of aids, equipment or alternative strategies does not enable the person to carry out tasks independently. Attendant care does not include providing reassurance or encouragement nor can it be for infrequent or unexpected events or medical emergencies.

The Companion Card cannot be issued to people who only require attendant care for social support, reassurance, encouragement or just-in-case-type of scenarios.

If you have any questions, please do not hesitate to contact the school.

Companion Card Website: <https://www.companioncard.nsw.gov.au/where-can-i-use-my-card>

Illness: There are several viruses/ conditions that have made their way to HRCS this week. It is often difficult to know what symptoms of conditions are and how long students need to be off school if they are diagnosed with illness. To assist you with this, a Hunter Health fact sheet has been attached for your information. If you have any queries, please contact the school or your local GP.

Communication Books: This week we have discovered that some of the student communication books are missing a page of information. The missing page is from the Health Information Section: you may have noticed that the pages were sequenced 4, 6 & 7. Page 5 will be added next week and we are sorry for any inconvenience.

P&C Meeting: Our Term 2 P&C meeting will be held Wednesday evening, 29 May, commencing at 6:30pm. Family and friends are warmly invited to come along and share in the P&C's vision for the remainder of the school year. Our P&C is an integral branch of our school and we would really value your input! Hope that you can join us on Wednesday 29 May!

Election BBQ: The P&C are very excited about our BBQ and Cake Stall at Metford Public School this Saturday (tomorrow). We will be selling from 7:30am and will be open until voting booths close. Thank you to everyone who has donated items and/or their time for Saturday, we are extremely thankful for your ongoing support. See you on Saturday!

I hope everyone has a wonderful week! **Kind Regards - Tracey**

Wellbeing Quote: "You are the bows from which your children as living arrows are sent forth". **Kahlil Gibran**

Entertainment Books: Entertainment books are available at our office. If you would like to order a digital copy of the entertainment books, please see link for our school: <https://www.entertainmentbook.com.au/orderbooks/34g406>

Canteen

Cheeseburger \$3.50
Nuggets x 6 \$3.00
Sausage Roll \$2.50
Salad Wrap \$4.00
Chicken Salad Wrap \$5.00
Popper \$1.00
Jelly Cup \$1.00
Cheese Slice \$.30
Milkshake \$2.50

Lunch orders will be sent home Thursday's and will be due back **Friday/ Monday**. This is important for shopping purposes.

May Birthdays

Kody 1 May
Shaan 4 May
Jackson 13 May
Koby 13 May
Joshua 18 May
Mitchell 26 May
Liam 27 May
Lily 27 May



Browny's Blog



I love going to senior bowling on Monday's and using the PODD Book in the community. Not only is it fantastic for our students but is a wonderful opportunity for people to watch us communicating using our a u g m e n t a t i v e communication skills!

This week we were talking about being happy. It was so funny when Nikkie and Blake were telling Jonathon and Michael to be happy. Jonathon and Michael are two of the happiest kids at HRCS! As you can see in the picture below, Jonathon's look and actions say it all!



Administration Notice: Just a reminder to families about the drumming fees. Payments can be made weekly or in a lump sum.

Family statements will be forwarded home next week. Please don't hesitate to contact our office to discuss any discrepancies or payment arrangements.

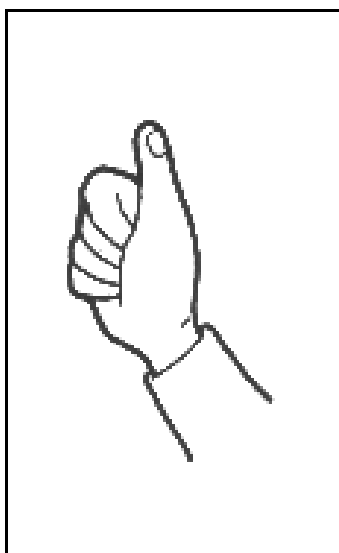
There are many outstanding notes from the packs that were sent home at the beginning of Term 1. If you have misplaced your notes, please contact our office and we will forward new notes home.



Sign of the Week

Word: Good

Extend thumb of right hand, move formation forward slightly with stress.

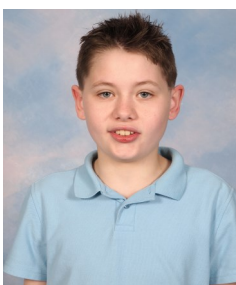
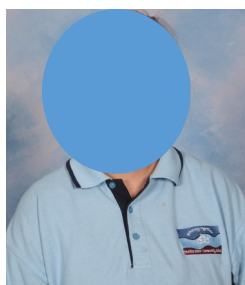


Student Leader Awards

Captains Awards: Today's Captain's Award was selected by Jacqueline and was awarded to Billy from Gazelle Room for great baking.

House Captain Awards: Today's House Captain's Award was selected by Brennan and was awarded to Nikkie from Hyena Room for excellent attitude to school.

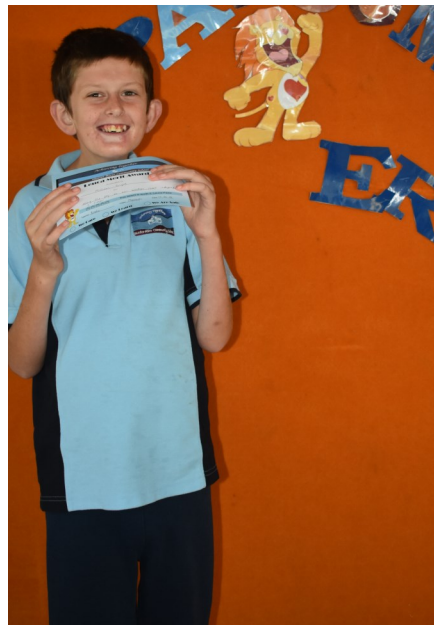
Prefect Awards: Our Prefect's Award for this week was selected by Adam and was awarded to Liam from Cheetah Room for great transition to Warthog Room.



Mother's Day High Tea



**PBL Awards
Term 2
Week 3**



**PBL Staff Awards
Term 2
Week 3**

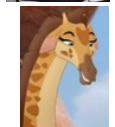
**Teacher
of the Week**
Jo—Hornbill



**Non-Teacher
of the Week**
Mandy— Toucan



**Top Playground
of the Week**
Giraffe



**Bottom Playground
of the Week**
Hornbill



'Principal Leuca Awards'

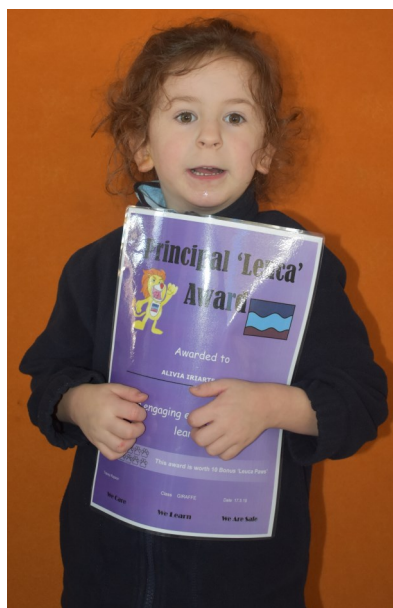
Alivia

Allen

Jonathon

Mattie





Cheetah Celebrate



What a busy week we have had in the room this week!

As well as getting through all of our school work, we have celebrated two milestones. Happy 18th Birthday Jackson, Happy 50th Birthday John.



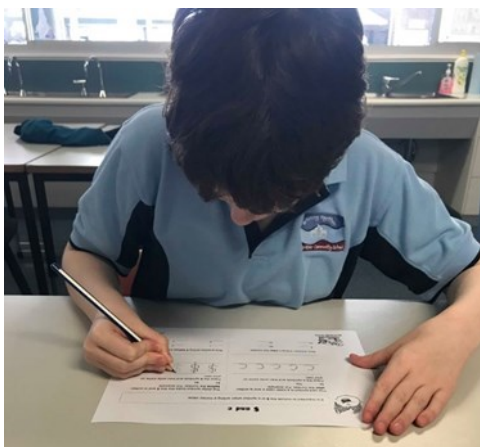
You can be sure of one thing when it comes to our room.....when we do something we do it well and we know how to



Happy Birthday Guys!



Meerkat



This week in Room 3, the Meerkats have kept busy! We have looked at elements of art this term and this week we studied the element called line. We made city at night artworks!

Also this term, Meerkats have been studying money. Meerkats have enjoyed sorting the coins and exploring the symbols used in financial maths!

What a fantastic week Meerkats!



Infectious diseases of childhood

Last updated: 22 July 2012

Children are at increased risk of some infectious diseases because they have not yet developed immunity to them, they tend to gather in groups, and they may have difficulty with some aspects of hygiene.

Chicken Pox

Time from exposure to illness

10 to 21 days, usually 14 to 16 days.

Symptoms

Slight fever, runny nose, and a rash that begins as raised pink spots that blister and scab.

Do I need to keep my child home?

Yes, for 5 days from the onset of the rash and the blisters have dried.

How can I help prevent spread?

Immunise your child at 18 months of age. Immunisation is recommended for children at 12 years if they are not immune.

Conjunctivitis

Time from exposure to illness

1-3 days.

Symptoms

The eye feels scratchy, is red and may water. Lids may stick together on waking.

Do I need to keep my child home?

Yes, while there is discharge from the eye.

How can I help prevent spread?

Careful hand washing; avoid sharing towels. Antibiotics may be needed.

Gastroenteritis

Time from exposure to illness

Depends on the cause: several hours to several days.

Symptoms

A combination of frequent loose or watery stools, vomiting, fever, stomach cramps, headaches.

Do I need to keep my child home?

Yes, at least for 24 hours after diarrhoea stops.

How can I prevent spread?

Careful hand washing with soap and water after using the toilet or handling nappies and before touching food.

German Measles (Rubella)

Time from exposure to illness

14 to 21 days.

Symptoms

Often mild or no symptoms: mild fever, runny nose, swollen nodes, pink blotchy rash that lasts a short time. Can cause birth defects if pregnant women are infected.

Do I need to keep my child home?

Yes, for at least 4 days after the rash appears.

How can I help prevent spread?

Immunisation (MMR) at 12 months and 4 years of age.

Glandular Fever

Time from exposure to illness

4 to 6 weeks.

Symptoms

Fever, headache, sore throat, tiredness, swollen nodes.

Do I need to keep my child home?

No, unless sick.

How can I help prevent spread?

Careful hand washing, avoid sharing drinks, food and utensils, and kissing.

Hand Foot and Mouth Disease

Time from exposure to illness

3 to 5 days.

Symptoms

Mild illness, perhaps with a fever, blisters around the mouth, on the hands and feet, and perhaps the nappy area.

Do I need to keep my child home?

Yes, until the blisters have dried.

How can I help prevent spread?

Careful hand washing especially after wiping nose, using the toilet and changing nappies.

Head Lice

Time from infestation to eggs hatching

Usually 7 to 10 days.

Symptoms

Itchy scalp, white specks stuck near the base of the hairs; lice may be found on the scalp.

Do I need to keep my child home?

No, as long as head lice management is ongoing.

How can I prevent spread?

Family, friends and classroom contacts should be examined and treated if infested. Clothing and bedding should be washed in hot water.

Hepatitis A

Time from exposure to illness

About 4 weeks (can range from 2 to 7 weeks).

Symptoms

Often none in small children; sudden fever, loss of appetite, nausea, vomiting, jaundice (yellowing of skin and eyes), dark urine, pale stools.

Do I need to keep my child home?

Yes, for 2 weeks after first symptoms or 1 week after onset of jaundice.

How can I help prevent spread?

Careful hand washing; those that have had close contact with an infected child may need to have an injection of immunoglobulin; immunisation is recommended for some people.

Impetigo (school sores)

Time from exposure to illness

1 to 3 days.

Symptoms

Small red spots change into blisters that fill up with pus and become crusted; usually on the face, hands or scalp.

Do I need to keep my child home?

Yes, until antibiotic treatment starts. Sores should be covered with watertight dressings.

How can I prevent spread?

Careful hand washing.

Influenza

Time from exposure to illness

1 to 3 days.

Symptoms

Sudden onset fever, runny nose, sore throat, cough, muscle aches and headaches.

Do I need to keep my child home?

Yes, until they look and feel better.

How can I prevent spread?

Careful hand washing, especially after coughing, sneezing or wiping your nose. Immunisation is recommended for children with chronic illnesses.

Measles

Time from exposure

About 10 to 12 days until first symptoms, and 14 days until the rash develops.

Symptoms

Fever, tiredness, runny nose, cough and sore red eyes for a few days followed by a red blotchy rash that starts on the face and spreads down the body and lasts 4 to 7 days.

Do I need to keep my child home?

Yes, for at least 4 days after the rash appears.

How can I prevent spread?

Immunisation (MMR) at 12 months and 4 years. Childcare/school attendees who are not immune may be excluded for 14 days after onset in the last case at the facility.

Meningococcal Disease

Time from exposure to illness

Usually 3 to 4 days (can range from 2 to 10 days).

Symptoms

Sudden onset of fever and a combination of headache, neck, stiffness, nausea, vomiting, drowsiness or rash.

Do I need to keep my child home?

Seek medical attention immediately.

How can I help prevent spread?

Individuals who have had close contact with the infected child should see their doctors urgently if symptoms develop, and may need to have a special antibiotic. Immunisation with Meningococcal C vaccine at 12 months of age.

Molluscum Contagiosum

Time from exposure to illness

7 days to 6 months.

Symptoms

Multiple small lumps (2-5mm) on the skin that are smooth, firm and round, with dimples in the middle. Lumps in children are mostly on the face, trunk, and upper arms and legs. Symptoms can last 6 months to 2 years without treatment.

Do I need to keep my child at home?

No.

How can I help prevent spread?

Avoid contact sports when a child has uncovered lumps.

Mumps

Time from exposure to illness

Usually 16 to 18 days (can range from 12 to 25 days).

Symptoms

Fever, swollen and tender glands around the jaw.

Do I need to keep my child home?

Yes, for 9 days after onset of swelling.

How can I prevent spread?

Immunisation (MMR) at 12 months and 4 years of age.

Ringworm

Time from exposure to till illness

Varies (may be several days).

Symptoms

Small scaly patch on the skin surrounded by a pink ring.

Do I need to keep my child home?

Yes, until the day after fungal treatment has begun.

How can I help prevent spread?

Careful hand washing.

Scabies**Time from exposure to illness**

New infections: 2 to 6 weeks; reinfection: 1 to 4 days.

Symptoms

Itchy skin, worse at night. Worse around wrists, armpits, buttocks, groin and between fingers and toes.

Do I need to keep my child home?

Yes, until the day after the treatment has begun.

How can I prevent spread?

Individuals who have had close contact with the infected child should be examined for infestation and be treated if necessary. Wash linen, towels and clothing worn in the past 2 days in hot water and detergent.

Scarlet Fever**Time from exposure to illness**

1 to 3 days.

Symptoms

Sudden onset sore throat, high fever and vomiting, followed by a rash in 12 to 36 hours.

Do I need to keep my child home?

Yes, until at least 24 hours of treatment has begun and the child is feeling better.

How can I prevent spread?

Careful hand washing. Sick contacts should see their doctor.

Slapped Cheek**Time from exposure to illness**

1 to 2 weeks.

Symptoms

Mild fever, red cheeks, itchy lace-like rash, and possibly cough, sore throat or runny nose. Can cause foetal disease in pregnant women if they have not been previously infected.

Do I need to keep my child home?

No as it is most infectious before the rash appears.

How can I prevent spread?

Careful hand washing; avoid sharing drinks.

Whooping Cough

Time from exposure to illness

Usually 9 to 10 days (can range from 6 to 20 days).

Symptoms

Starts with a running nose, followed by persistent cough that comes in bouts. Bouts maybe followed by vomiting and a whooping sound as the child gasps for air.

Do I need to keep my child home?

Yes, until the first 5 days of a special antibiotic have been taken.

How can I help prevent spread?

Immunisation at 2, 4, 6 months and 4 years of age. A particular antibiotic can be given for the patient and those that have been in close contact. The infected child should be excluded from childcare and school until 5 days after treatment begins. Unimmunised childcare attendees may be excluded from childcare unless they take the antibiotics.

For further information please call your local Public Health Unit on 1300 066 055 or visit the New South Wales Health website www.health.nsw.gov.au

Fact sheet

Information for **applicants**



What is the Companion Card?

The Companion Card program is a not for profit program funded by the NSW Government.

A Companion Card is for people with significant and permanent disability that need a carer with them at all times to participate in community based activities and venues.

The card itself is the size of a credit card, with the name and a photo of the holder – who is the person with disability. When the holder buys a ticket for themselves at participating venues and facilities, their companion will get free entry.

Companion Cards are not means tested and those assessed as eligible have the card for life.


Who is eligible to apply?

You may be eligible for a Companion Card if:

1. you are an Australian citizen or resident, and live in NSW; and
2. you are a person with a significant and permanent disability; and
3. you are unable to participate at most community venues or activities without attendant care support; and
4. aids and other technologies do not meet your attendant care needs; and
5. your need for this level of attendant care will be life-long.

How to apply

Fill out a hard-copy (paper) application form (available on the NSW Companion Card website) and post it to NSW Companion Card at:

 Companion Card Locked Bag 4028
Ashfield NSW 1800

What information do I need to provide with my application?

Applicants must complete a written application form and provide:

- » information about their disability and need for lifelong attendant care support
- » two colour passport photographs
- » verification of the application and photographs by a service provider or health professional.

How will my application be assessed?

NSW Companion Card will consider all of the information provided with the application when deciding whether the applicant is eligible for a Companion Card.

If further information is required, NSW Companion Card will contact the health professional or service provider that signed the application form and/or the applicant.

What happens if my application is declined?

NSW Companion Card will contact you to discuss the decision to decline your application.

If you are unhappy with the decision you can ask for a review. Any new information you provide, with the information obtained in your original application, will be considered in the review process.

If your circumstances change you can provide new information and ask for your application to be re-assessed at any time.



 info.companioncard@facs.nsw.gov.au

 1800 893 044

 www.companioncard.nsw.gov.au

Cardholder Application Form

June 2018



HOW TO APPLY

- ☐ 1. Be sure you understand the terms and condition of the Companion Card
- ☐ 2. Obtain two, high quality, colour passport photos, have them signed by a health professional or service provider and include them with this form
- ☐ 3. Have the application form signed by the same health professional or service provider
- ☐ 4. Attach any copies of reports you have, which show you will need a carer to access the community for the rest of your life. (Cards are only approved when the applicant has a life-long need for attendant care)
- ☐ 5. Return this application to:
Companion Card
Locked Bag 4028
Ashfield NSW 1800

➔ **Original applications and photographs will not be returned**

Please note: incomplete applications, including those without signatures, signed photographs or poor quality photographs, cannot be processed.

Your application will be processed within 20 working days.

ELIGIBILITY CRITERIA

You may be eligible for a Companion Card if:

- 1. you are an Australian citizen or resident, and live in NSW; and
- 2. you are a person with a significant and permanent disability; and
- 3. you are unable to participate at most community venues or activities without attendant care support; and
- 4. aids and other technologies do not meet your attendant care needs; and
- 5. your need for this level of attendant care will be life-long.



If you see
this symbol
at the top of a page,
you may be required to
attach some additional
documentation.

PRIVACY

The NSW Department of Family and Community Services (FACS) is collecting your personal information on this form to assist in assessing your eligibility and to administer the Companion Card program. Your personal information will not be disclosed to any third party without your consent or unless required by law. Information collected may be accessed by a *Government Information (Public Access) Act 2009 (GIPA Act)* request. The information in this form is managed by FACS in accordance with the *Privacy and Personal Information protection Act 1998 (PPIP Act)*.



If you have questions about this form
please contact NSW Companion Card:

1800 893 044

Translating and Interpreting Service: 13 11 14
applications.companioncard@facs.nsw.gov.au
www.companioncard.nsw.gov.au

Cardholder

Application Form

June 2018



APPLICANT INFORMATION

ITEM 1. The Companion Card will only be issued in the name of the person with the disability. One application must be completed per applicant.

Applicants title	<input type="text"/>	(eg. Dr/Mr/Mrs/Ms/Miss/other)
Surname	<input type="text"/>	
First name	<input type="text"/>	
Name as you would like it to appear on the card	<input type="text"/>	
Gender	<input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> indeterminate/intersex/unspecified	
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	(if date of birth is not known, approximate age in years) <input type="text"/>
Telephone number	<input type="text"/>	
Email (if available)	<input type="text"/>	
Residential address	<input type="text"/>	
Suburb	<input type="text"/>	
State	<input type="text"/>	Postcode <input type="text"/>
Postal address (if different from above)	<input type="text"/>	
Suburb	<input type="text"/>	
State	<input type="text"/>	Postcode <input type="text"/>
Who do you nominate as your primary contact regarding this application (other than yourself)		
Name	<input type="text"/>	
Phone number	<input type="text"/>	Relationship <input type="text"/>

ITEM 2. Cultural information (optional). Cultural information received will be used to improve policy and service delivery.

Do you identify as:

☐ Aboriginal ☐ Torres Strait Islander ☐ Aboriginal and Torres Strait Islander

Do you speak a language other than English at home? ☐ Yes ☐ No

If yes please specify language spoken

Cardholder Application Form

June 2018



ITEM 3. If your need for an attendant carer is not permanent, you are not eligible to receive a Companion Card.

Please tick the boxes and describe your disability. We have provided some examples of diagnoses or conditions to assist you to complete this section. Please attach copies of any formal assessments of your condition/s (e.g. visual readings, IQ assessments etc.)

(You can tick more than one box)

Physical (eg.: Muscular Dystrophy, quadriplegia, Cerebral Palsy)

Diagnosis

**Report
attached**

☐

Neurological (eg.: Alzheimer's disease, Huntington's disease)

Diagnosis

☐

Sensory (eg.: deaf, blind, legally blind)

Diagnosis

☐

Acquired Brain Injury (eg.: Stroke, head injury)

Diagnosis

☐

Intellectual (eg.: Fragile X syndrome, Rett syndrome)

Diagnosis

☐

Mental Health (eg.: Schizophrenia)

Diagnosis

☐

Other: Give a description of the condition that has resulted in your disability.

Note: If you do not have a formal diagnosis, briefly describe your condition.

Cardholder Application Form

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ITEM 4. This section is for applicants who live in high level residential support with staff onsite 24 hours.

If you live in one of these services the manager of the facility can sign this form and your photo.
If you do not live in 24/7 residential support, your doctor must sign **ITEM 6** instead.

Do you currently receive (or have approval to receive) one of the specific services or supports listed below?
If you do not receive one of the specifically named services below, please tick 'No'.

☐

No > **proceed to ITEM 5** to continue with your application.

☐

Yes > **Please tick below the specific service you receive.**

☐

Government funded group home, 24/7 care

☐

Nursing home, 24/7 care

☐

Government funded Large Residence, 24/7 care

☐

Department of Veterans Affairs
Attendant allowance

SERVICE PROVIDER DETAILS

To be completed by Manager, or equivalent, of service as indicated above:

Name

Position in organisation

Employer/organisation name

Address

Suburb

State

Postcode

Phone number

Email

DECLARATION FROM CURRENT SERVICE PROVIDER

My signature below confirms all the following: I have read all the information contained within this form, and verify that it is correct to the best of my knowledge; and I verify that the applicant has a permanent disability and will always require attendant care to participate at most community venues and activities; and I am not the applicant, or an immediate family member of the applicant; and I agree to offer all reasonable assistance and records to assist the Companion Card program to determine the applicant's eligibility; and I have written the applicant's name and signed on the reverse of the photographs to verify that it is a photograph of the applicant.

Signature

Date

Organisation stamp (if available):

If you have completed this page please go directly to Item 7

Cardholder

Application Form

June 2018



ITEM 5.

To receive a Companion Card you must demonstrate that due to your disability you are unable to participate at most community activities without attendant care support from a companion/carer.

Attendant care support includes life-long assistance with mobility, communication, self-care, planning, where the use of aids, equipment or alternative strategies does not enable you to carry out these tasks.

It does not include providing only reassurance, social company or encouragement or care that is required due to a persons young age.

Companion Cards cannot be issued if you may become independent in the future as a result of treatment/management, training, recovery or developmental improvements.

Using the boxes below, describe the applicant's need for lifelong attendant care in the areas of mobility, communication, self-care and planning when accessing a community event or venue.

- Include examples of the attendant care the companion provides.
- If the applicant's condition is episodic, describe the frequency of the episodes.
- How does the applicant currently access community venues and activities?
- Describe the applicant's use of aids or equipment.
- Point form is acceptable.

Scale of assistance required: **MINIMAL** – can perform 75% or more of task **SOME** – can perform 50% to 74% of task **SUBSTANTIAL** – can perform 25% to 49% of tasks.

Mobility

☐ Minimal ☐ Some ☐ Substantial assistance required

Communication

☐ Minimal ☐ Some ☐ Substantial assistance required

Cardholder

Application Form

June 2018



ITEM 5. (continued)

Self-care

☐

Minimal

☐

Some

☐

Substantial assistance required

Planning

☐

Minimal

☐

Some

☐

Substantial assistance required

Describe your use of aids or equipment (if any)

Is there anything else you would like to add in the space below to support this application?

Note: It is helpful to include details and contact information of any other disability support Services below, e.g.: Day Programs, Respite Care, Speech Therapy, Occupational Therapy, Physiotherapy, etc. School, School support unit, School Counsellor.

Cardholder

Application Form

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ITEM 6. Health Professional Declaration

(If you receive one of the services listed in ITEM 4, your Health Professional does not need to complete ITEM 6)

Do not sign this form unless you can verify the applicant is permanently unable to participate at most venues and activities without a companion to provide attendant care support

I am currently practising as one of the following: please tick

- | | | |
|---|---|--|
| <input type="checkbox"/> Registered Medical Practitioner | <input type="checkbox"/> Registered Psychologist | <input type="checkbox"/> Qualified social worker |
| <input type="checkbox"/> Qualified speech pathologist | <input type="checkbox"/> Registered Physiotherapist | <input type="checkbox"/> Registered Nurse |
| <input type="checkbox"/> Qualified occupational therapist | <input type="checkbox"/> Registered Ophthalmologist | |

I have seen the applicant in a professional capacity for years months

Describe the lifelong attendant care required by the applicant to enable them to access community venues and activities:

Using the boxes below, please describe in detail the impact of the applicant's disability on:

Scale of assistance required:

MINIMAL – can perform 75% or more of task **SOME** – can perform 50% to 74% of task **SUBSTANTIAL** – can perform 25% to 49% of tasks

Mobility

- ☐ Minimal ☐ Some ☐ Substantial assistance required

Communication

- ☐ Minimal ☐ Some ☐ Substantial assistance required

Cardholder Application Form

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ITEM 6. Health Professional Declaration (continued)

Self-care

☐ Minimal ☐ Some ☐ Substantial assistance required

Planning

☐ Minimal ☐ Some ☐ Substantial assistance required

Provide details about the treatment and recovery available to the applicant and indicate if the applicant will require attendant care support for the rest of his/her life to enable them to access community venues and activities:

My signature below confirms all the following: I have read all the information contained within this form and verify that it is correct to the best of my knowledge; I verify that the applicant has a significant and permanent disability and will always require attendant care at most community venues and activities; I am not the applicant nor am I an immediate family member of the applicant; I agree to provide all information reasonable to assist the Companion Card unit in determining the applicant's eligibility; I have written the applicants name and signed the reverse of both photographs to verify that they are of the applicant.

Provider number

Phone Number

Name

Employer/ business name

Address

Email

Signature

Date

/ /

June 2018



My signature below confirms all the following: I authorise the Companion Card program to verify the information I have supplied on this form and to obtain any information relating to my application for the purpose of assessing my eligibility for a Companion Card. This may include obtaining information held in databases by government departments and agencies, and disclosing information contained in this form or obtained in connection with this application for the purpose of assessing eligibility; I agree that health professionals or service providers may disclose information about me to the Companion Card program to assist with the assessment of my application and I understand and accept the Cardholder Terms and Conditions.

Applicant
signature

Date _____

/	/
---	---

OR

Legal guardian/
agent signature

Date _____

/	/
---	---

Name of legal guardian/agent

Relationship to applicant

Telephone/TTY

[illegible]

- Include two colour passport photographs.**

Do not use tape, staples,
glue or pins.

The photographs must be a full front view of the Applicants head and shoulders only.



Write your name on the reverse of both photographs and have them signed by the professional who signed your form.

If you are completing this form on behalf of the applicant, please provide your details below:

Name _____

Relationship to applicant

Telephone/TTY

[illegible]

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