



FRIENDLY CALL CORK

Service for People Living Alone in Cork

What is Friendly Call

- Friendly Call is a FREE Service providing a phone call 5 days a week; Mon - Fri
- Your Friendly Caller will chat to you about your day and will check on how you are feeling
- The service provides friendship and security making you feel safer at home
- If you do not answer the phone, the Friendly Caller will phone a member of your family, neighbour or friend

The Friendly Call Service is available in the Cork city area to;

- Older People or Individuals who may feel lonely, isolated and vulnerable
- People with Chronic Illness
- Anyone who cannot engage in an active way in the wider community

Complete Application Form and return to:

**Friendly Call Cork, Cork City Partnership Gurrabraher Office
Parochial Hall, Knockfree Avenue, Churchfield, CORK**

FRIENDLY CALL CORK

Cork City Partnership

Gurrabraher Office Parochial Hall, Knockfree Avenue,

friendlycall@partnershipcork.ie 087 636 6407 or 021 430 1700



CLIENT APPLICATION FORM

1. ABOUT YOU

Surname: _____ First Name: _____
 Telephone No: _____ Date of Birth: _____
 Address: _____

Do you normally live alone? (Please tick) Yes No

2. ABOUT YOUR HEALTH?

(a) Do you suffer from any of the following? (please tick)

Vulnerable		Socially Isolated	
Hearing Difficulties		Speech Difficulties	
Sight Difficulties		Mobility Difficulties	
Depression		Other	

(b) Are there any other details about your health you require us to know? _____

(c) What other health and social care services are you currently receiving? _____

3. ABOUT YOUR CONTACTS:

Please list below the names, addresses and telephone numbers of two friends or relatives who are prepared to accept responsibility to check on you if your telephone is not answered when we call. (It would be helpful if one of these contacts is a key holder who has access to your home.)

First Contact

Name: _____ Keyholder? Yes No
 Address: _____
 Phone No. _____ What is their relationship to you? _____

Second Contact:

Name: _____ Keyholder? Yes No
 Address: _____
 Phone No. _____ What is their relationship to you? _____

4. ABOUT YOUR CALL

Friendly Call Cork will operate between the hours of 9.30am and 4.00pm. Please indicate a suitable time to receive your call.

_____AM/PM

5. ABOUT THE REFERRAL

Who referred you to the "Friendly Call Service"? _____

Referrer's contact details _____

6. ABOUT YOUR DOCTOR

Please give the name, address and telephone number of your doctor.

Name: _____

Address: _____

The information I have given above is complete and correct and I understand that Friendly Call Cork may contact me to verify this information at any time.

I wish to have my name included in the list of those who receive a telephone call each day from Friendly Call Cork.

I agree that a Friendly Call Service representative is authorised by me if he/she thinks it is desirable to communicate with my doctor or the persons whose names I have given as contacts outlined.

I agree that if my application is accepted, I shall at all times inform Friendly Call Cork when my telephone will not be answered at the pre-arranged time.

This is a voluntary community service with no statutory responsibility for this area and is under no legal obligation to provide this service.

The Organisation has highlighted to me how my personal information will be used and stored by them as per the attached privacy statement.

I agree to be contacted as part of any future review of Friendly Call Cork.

I understand the terms & conditions of Friendly Call Cork and meet all the eligibility requirements.

SIGNED: _____

Date: _____

FOR OFFICAL USE ONLY

Date Application Received _____

Date Client Contacted _____

Date Privacy Notice Sent _____

Commencement Date _____