



Rockpool

Residential
Aged Care

Application Form & Pre-Admission Documents



— Bill Summers
Executive Chairman

Our mission is to provide care and services creating an environment for residents, families and staff that is safe, secure, inclusive, contemplative, reflective and vibrant with life.

Thank you for considering Rockpool Residential Aged Care.

The information you provide in this form will help us to get to know you and understand your needs.

We understand this may be a busy and possibly stressful time for you and your family, we want to assure you that we are here to help you in any way we can.

When you've completed as much of the Application Form as you can, please email it back to admissions@rockpoolrac.com

Documents required for pre-admission:

- ACAT assessment - Residential Referral Codes**
- Application Form & Pre-Admission Documents** (this booklet)
- COVID-19 vaccination certificate**
- EPOA - Enduring Power of Attorney**
- Copy of Cards** (Pension, DVA, Medicare or private health)
- Medication Health Summary Chart** (can be obtained from your GP)
- AHD - Advanced Health Directive** (or Statement of Choice)
- Assets and income assessment** (if applicable)
Visit www.servicesaustralia.gov.au/forms and select 'Aged Care Calculation of your cost of care' an complete and lodge whichever form is applicable with Centrelink (Google to access forms: sa485, sa457 and sa313)
- Direct Debit Authority**
- Pharmacy Direct Debit Authority**
- Resident's Doctor's Registration Form**
- Rockpool Resident Agreement & Invoice** (office use only)

Symbol key

The symbols below appear throughout this document to assist you in completing this Application Form. These symbols indicate:

 **Read more here**
– extra information provided on a topic.

 **Contact us if you require further information**
– call 1800 515 053.

Private and confidential

In accordance with our Privacy Policy, we make every effort to keep any personal information up-to-date and accurate. If you require access to any of your personal information that we hold, or wish to notify us of any change, modification or correction, or would like us to delete your personal information from our records, please contact us on 1800 515 053 or email admissions@rockpoolrac.com

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ACAT (Aged Care Assessment Team)

To apply for residential care, an Aged Care Assessment Team (ACAT) needs to have completed an ACAT assessment.

ACATs are funded by the Australian Government and the assessment is free of charge. To arrange an ACAT assessment visit the My Aged Care website at

www.myagedcare.gov.au
or contact us on 1800 200 422.

Assets and income assessment

It is recommended residents' complete an assets and income assessment prior to admission to determine their residential fees. This ensures accurate calculations of fees and prevents residents' being charged the full Means Tested Care Fee (MTCF).

To obtain an assets and income assessment you need to submit one of the following forms to Centrelink:

- Residential Aged Care Calculation of your cost of care (SA457)
- Residential Aged Care Property details for Centrelink and DVA customers (SA485)

Primary Contact

Title: Mr Miss Mrs Ms

First name(s):

Last name:

Address: Street: Suburb: State: Postcode:

Contact information: Telephone: ()

Email:

Relationship to Resident:

Do you have the legal authority to make decisions on the resident's behalf? Yes No

If yes, what type of authority do you have?

Enduring Power of Attorney Enduring Power of Guardianship Administrator

Please list additional emails to receive communications from the home while the resident is at Rockpool.

Secondary Contact

Title: Mr Miss Mrs Ms

First name(s):

Last name:

Address: Street: Suburb: State: Postcode:

Contact information: Telephone: ()

Email:

Relationship to Resident:

Do you have the legal authority to make decisions on the resident's behalf?

Yes No

If yes, what type of authority do you have?

Enduring Power of Attorney Enduring Power of Guardianship Administrator



If you are completing this form on behalf of the resident, please note the questions are styled as if they are being asked of the resident. If you don't have any formal authority to act on behalf of the applicant, this may be something that needs to be considered.

Accommodation information

This section tells us about where you're living now and the kind of accommodation you require.

Where do you live at the moment?

- | | | |
|-----------------------------|-----------------------------|----------------------|
| A residential care facility | In hospital or interim care | Retirement village |
| With a family member | My own purchased home | Rental accommodation |
| Other | | |

If you are already in a residential care facility, retirement village or hospital/interim care, please tell us which one:

If you selected 'Other', please provide details:

When do you require accommodation?

- | | |
|---------------------|-----------------------------|
| As soon as possible | Future date (please advise) |
|---------------------|-----------------------------|

Which type of accommodation would you like to apply for?

Please tick one of the boxes below.

- | | |
|-------------|---|
| Residential | Memory support unit (<i>secure dementia care</i>) |
| Respite | Palliative |

Have you had an ACAT assessment?

- | | |
|-----|---|
| Yes | No (<i>See ACAT info on page 1 – myagedcare.gov.au</i>) |
|-----|---|

If yes, what is your ACAT Reference Number (eg. 1-12345678)?



The Aged Care Assessment Team will conduct an assessment and complete a National Screening and Assessment Form (NSAF) and a Support Plan which will include recommendation about the type of residential care that best suits your needs, so if you're unsure about what to tick here please refer to your ACAT assessment.

Are you currently receiving a Home Care Package?

- | | |
|-----|----|
| Yes | No |
|-----|----|

If yes, what level are you receiving and which organisation is providing the care?

- | | | | |
|---------|---------|---------|---------|
| Level 1 | Level 2 | Level 3 | Level 4 |
|---------|---------|---------|---------|

Provider details:

Medicare and pension details

Here we ask for details of your Medicare number and Pension. Details about your income will help us to answer any questions about the financial aspects of your application. This information is kept confidential.

Medicare details

Enter your Medicare card number:

Individual Reference Number (IRN)

Valid to:

Example:



In the above example, the Medicare card number would be completed as:

1 2 3 4 - 5 6 7 8 9 - 0

The Individual Reference Number (IRN) is next to the applicant's name.

In this example, for Doreen Jones, the IRN would be: 2

Pension details

Please indicate if you have a pension:

I receive a full pension

I receive a part pension

I do not receive a pension

If you receive a pension, please indicate the type:

Age

Disability

Widow

DVA

Overseas

Enter your pension concession card number (if applicable):

Expiry date:

Enter your DVA treatment card number (if applicable):

Expiry date:

Colour:

Gold

White

Orange

Your doctor and other health professionals

It's important for us to know who your doctor is and details of anyone else who is important to your ongoing medical treatment or healthcare.

Your general practitioner

Name of your GP:

Name of your GP's medical practice (if applicable):

Address:

Street:

Suburb:

State:

Postcode:

Contact information:

Telephone: ()

Email:

Please indicate if you intend to continue to use your GP if you are offered a place at Rockpool

Residential Aged Care:

Yes*

No

Unsure

** If you select 'Yes' and you intend to use your GP, please be advised you will need to coordinate these appointments with your GP office directly.*

Other health professionals important to your care

Name:

Field/speciality:

Contact information:

Telephone: ()

Email:

Name:

Field/speciality:

Contact information:

Telephone: ()

Email:

Name:

Field/speciality:

Contact information:

Telephone: ()

Email:

Your assets

Now that we know about your income, we need details of your assets, to complete the picture of your current financial position. This will help us work out how much you may need to pay for your accommodation.



As the financial implications of aged care are complex, before you make any financial decisions you may wish to contact a specialist aged care financial advisor. Call us on 1800 515 053 for a list of reputable local advisors. Centrelink also provides a free financial information service on 13 23 00.



If you have requested an assets and income assessment from the Australian Government, we still need you to complete this section. This will help us provide the best advice regarding your likely costs and any financial assistance you may be eligible for.

Safety Net Card number:

Income

Please list all current income you receive and its source:

Please complete one column only in Australian dollars.

	Fortnight	Four Weekly	Calendar Month	Annual
--	-----------	-------------	----------------	--------

Centrelink or
DVA pension

Superannuation

Overseas pension

Other (Please specify
source e.g. share dividends)

Do you presently own your own home? Yes No

If 'Yes', do you own your own home, either solely or in partnership with anyone else?

Solely In partnership

After you move into our residential care facility will anyone still be living in the home?

Yes No Not applicable

If yes, please give details of who, including their pension type and the date of commencement:

Your assets

Now that we know about your income, we need details of your assets, to complete the picture of your current financial position. This will help us work out how much you may need to pay for your accommodation.

Have you made gifts to anyone of over \$10,000 in any one year during the last five years, or totalling \$30,000 in any five-year period? Yes No

What was the last year you submitted a tax return:

Have you been or are you a participant in a family trust? Yes No

If yes, what was the last year that you received a benefit from it and what was the benefit (approximately)? Date: / /
\$

Please complete the following table:

Assets*	\$
Value of home (excluding contents)	
Household contents and effects	
Shares – current value	
Real estate (other than your home)	
Term deposits	
Bank accounts	
Motor vehicle	
Boat	
Caravan	
Collections (stamps/art/jewellery/other)	
Any other assets (e.g. precious metals):	
1.	
2.	
3.	
Total assets	
Liabilities*	\$
Mortgage on your home	
Other mortgages:	
1.	
2.	
3.	
4.	
Loans	
Any other liabilities (e.g. bank overdraft):	
1.	
2.	
3.	
Total liabilities	

* Please only include the value of your share of an asset.



Sources of income could include a pension, any investments, superannuation, annuities or interest received from term deposits.

Resident Privacy Statement and Consent

Rockpool Residential Aged Care is committed to protecting your privacy and to ensuring we can provide you with the best possible care and services.

Privacy Statement

Protecting your privacy: We are bound by the Privacy Act 1988 (Cth) (the Privacy Act) and the Australian Privacy Principles. This Privacy Collection Statement should be read in conjunction with our Privacy Policy which contains detailed information on how we protect your privacy, including the way in which we may collect, use and disclose your information. A copy of our Privacy Policy is available on our website or at our facility, ask the Facility Manager.

Collection of information: We collect personal information about individuals directly from the individual or their legal representative. We will only collect information for a purpose that relates directly to our functions and activities as an aged care provider. We understand that you may not want to provide information to us. The information we request of you is relevant to providing you with the care and services you need. If you choose not to provide us with some or all of the information we request, we may not be able to provide you with the care and services you require. For more detailed information, please refer to our Privacy Policy.

Use and disclosure: We will use and disclose your personal information only for the purpose for which it was collected or for any other purpose that is otherwise directly related to our functions or activities as an aged care provider or otherwise permitted at law. Please refer to our Privacy Policy for more detailed information.

Access and correction of information: Our Privacy Policy also contains detailed information on how you may access the personal information we hold about you and how you can seek to have your personal information corrected.

Overseas recipients: We will not disclose your information to overseas recipients. If we do, we will take all steps that are reasonable in the circumstances to ensure that the overseas recipient does not breach the Australian Privacy Principles.

Making a complaint: If you wish to make a complaint about the way we have managed your personal information you may make that complaint verbally or in writing by setting out the details of your complaint to any of the following:

- i) The Facility Manager at our facility
- ii) National Aged Care Advocacy Line 1800 700 600.
- iii) Aged Care Quality and Safety Commission Online: <https://www.agedcarequality.gov.au>

How to contact us: If you have any questions in relation to privacy or how we manage your personal information, please email info@rockpoolrac.com

Rockpool Residential Aged Care Facility Manager:

Facility:	Rockpool Carseldine	Rockpool Morayfield	Rockpool Pelican Waters	Rockpool Songbird Oxley
Address:	56 Plaza Place, Carseldine. Qld 4034	49 Amy Street, Morayfield. Qld 4506	17 Spitfire Banks Drive, Pelican Waters. Qld 4551	Seventeen Mile Rocks Road Oxley. Qld 4075
Phone:	1800 515 053	1800 515 053	1800 515 053	1800 515 053

Consent

Sensitive Resident Information and Collection of Information

We collect personal information about residents but only for a purpose that relates directly to our functions and activities as a provider of aged care. Some of the functions and activities of providing aged care from time to time include providing information to the Commonwealth or State Government Departments for their assessment and analysis or to evidence funding claims. Where information is provided to Government for quality measurement, we de-identify that information wherever the law permits.

We also examine our own practices as part of our continuous improvement program and take actions based on our audit findings to improve the quality of the services we offer. We take steps to secure the information we collect during and following such audits from any unauthorised access. Some residents or their authorised representative/s, may wish to limit the use of their information. If you wish to request that your information not be used for any of the above purposes, please detail such requests below. (You may also use this opportunity to specify if there is any personal information you do not wish to be communicated to any person should they ask us).

I consent to the use of my personal information to provide me with aged care and incidental use of that information requested by Government under law.

Yes

However, I request the following limits to disclosure of information about me:

Resident Privacy Statement and Consent

Rockpool Residential Aged Care is committed to protecting your privacy and to ensuring we can provide you with the best possible care and services.

Personal Care and Medical Treatment

I consent to the staff providing the following:

- Medication as ordered by a Medical or Nurse Practitioner in the manner directed for that medication
- Administer nurse-initiated medications from the approved list authorised by a medical practitioner
- Physical therapy
- All aspects of Personal Care and assessments
- Other care as planned
- I understand that I will be consulted in regard to all care prior to its planning, implementation and review. Yes

Environmental security

Rockpool Residential Aged Care has enabled its homes to secure certain households, communities or wings by the use of keypad-controlled doors to certain areas. This is offered for the security and safety of residents. It is suitable for people who, because they are living with dementia or similar, are at risk of wandering.

I hereby consent to my accommodation in the named household, community or wing at the above residential aged care home. I am aware that:

- Access to and from that area is by entry of a code into a keypad in order to unlock the door or gate to the household or community;
- If I am unable to remember that code and I may need to ask for staff assistance should I wish to exit;
- I understand that some residents who are "at risk" of getting lost if they leave the home unaccompanied may also reside here, and I am aware that I am not to give the key code to any other person in the building. Yes

Consent for World Map display (if applicable)

- I give my consent to display my first name
and my country of birth for the World Map be displayed in the corridor. Yes No

Consent for excursions

- I consent to participate on day excursions, traveling by bus to and from the place of interest.
- I agree to follow the directions of staff whilst on an outing. Yes No

Non-smoking declaration

I acknowledge and agree that:

- Rockpool Residences are non-smoking services and smoking is not permitted within any building of the Residence or within 5 metres of the boundary. Yes
- Rockpool may elect to maintain a designated smoking area at the Residence, however this will be at Rockpool's sole discretion and on such conditions they may choose to impose. Yes
- These rules apply to me, my relatives, my friends and any other visitors I invite to the Residence. Yes
- I have received a copy of the Rockpool Resident Handbook and have read and understood the terms and conditions contained in the handbook, including the provisions which state Rockpool Residences are non-smoking services. Yes

Permissions

I give permission for the following:

- To have my name displayed on my bedroom door. Yes No
- To announce my birth date and celebrate my birthday. Yes No
- To have my photograph taken and displayed as required within and at Rockpool.
This could include but not limited to birthday celebrations, group activities, and on room doors. Yes No
- To have my photograph taken and/or story written for publication in various Rockpool marketing, advertising and promotional materials.
This may include stories and photographs about Rockpool facilities and its employees and residents in printed and digital materials, online and social media applications, and for various print and digital advertising purposes. Yes No

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Steps to Move In

What steps are needed to move in to Rockpool?

If you are interested in placement at Rockpool Residential Aged Care, please ensure you have a valid Aged Care Assessment. The free assessment provided by the Aged Care Assessment Team (ACAT), assesses eligibility to receive government subsidies for respite or permanent residential care.

You can find your local ACAT team on the **My Aged Care website** <https://www.myagedcare.gov.au/>, located at the bottom of the home page all highlighted in BLUE, you will see the headings:

- **Eligibility Checker** <https://www.myagedcare.gov.au/am-i-eligible>
- **Apply for an Assessment** <https://www.myagedcare.gov.au/assessment/apply-online>

You may have been assessed already and have a **client residential referral code**. We will require this code to access your care details via the My Aged Care Portal.

- **If you wish to enter care without a valid Aged Care Assessment** you would be considered a **private** fee client.

Please complete the following documents and return to Rockpool Team. If you require assistance completing the forms, please contact our admissions team to schedule an appointment and one of our friendly team members will be able to assist you.

Checklist required for pre-admission:

ACAT assessment - Residential Referral Codes

Application Form & Pre-Admission Documents (this booklet)

COVID-19 vaccination certificate

EPOA - Enduring Power of Attorney

Copy of Cards (Pension, DVA, Medicare or private health)

Medication Health Summary Chart (can be obtained from your GP)

AHD - Advanced Health Directive (or Statement of Choice)

Assets and income assessment (if applicable)

Visit www.servicessaustralia.gov.au/forms and select 'Aged Care Calculation of your cost of care' an complete and lodge whichever form is applicable with Centrelink (Google to access forms: sa485, sa457 and sa313)

Direct Debit Authority

Pharmacy Direct Debit Authority

Resident's Doctor's Registration Form

Rockpool Resident Agreement & Invoice (office use only)

Understanding Permanent Admission Fees

Permanent Admission Fees and Charges Explained

The explanation in this document will assist you to understand how fees and charges are calculated generally. The amounts used for the calculations in this document are based on the advertised room price for the relevant room you have been offered and the financial information provided by you to date. However, the amounts used in the calculations below may change as set out in the Resident Agreement and are used as an example only.

This document does not form a part of your Resident Agreement. The fees and charges applicable to your circumstances are set out in your Resident Agreement. For full details regarding aged care fees and pricing, please refer to the Department website www.myagedcare.gov.au or seek financial advice. If you require a list of aged care financial providers, please contact your Rockpool Admissions Team.

Applicable to those deemed eligible to pay an accommodation charge:

RAD / DAP – Accommodation Payment

\$

The accommodation Payment is made up of a lump sum Refundable Accommodation Deposit (RAD) and / or Daily Accommodation Payment (DAP). The RAD is the advertised room price which is payable from the date of admission and refundable upon discharge. Residents have 28 days to decide on payment preference. If a RAD is the preferred payment choice, a DAP will be charged (from the date of admission) until the RAD is paid in full, the DAP is non-refundable.

OR

RAC / DAC Accommodation Contribution

\$

The Accommodation Contribution is the amount paid by residents deemed as eligible to receive assistance from the Services Australia (Centrelink) but are also able to provide a contribution to their care needs. This amount may vary and is determined by the Income and Assets Assessment (which may change from time to time) and is not paid by residents who provide an Accommodation payment (RAD/DAP) nor those considered by Services Australia to be fully supported. If a RAC is the preferred payment choice, a DAC will be charged (from the date of admission) until the RAC is paid in full, the DAC is non-refundable.

OR

Interim Accommodation Contribution

\$

For residents who have yet to receive the outcome of their Income and Assets Assessment, an estimated amount will be taken from the Residential Care Fee Estimator (based on information you provide) on the My Aged Care website. Should the Estimator calculate the resident as 'low means' (fully supported or able to pay an accommodation contribution), the maximum accommodation supplement will be charged until the result of the Income and Assets Assessment is received. After the 90 days post admission, if the Department have not advised of applicable fees, maximum fees will be applied until we receive the information, at which time an appropriate adjustment will be made.

MTCF – Means Tested Care Fee

\$

This is an additional contribution towards the cost of care that some people may be required to pay. Services Australia (Centrelink) will calculate if the resident is required to pay this fee based on an assessment of the resident's income and assets. The Department reassess residents every quarter and such, this fee may fluctuate dependent on any changes which may have occurred altering the resident's income and assets.

OR

MTCF – INTERIM Means Tested Care Fee

\$

The Interim MTC Fee is an estimated amount taken from the Residential Care Fee Estimator (based on information you provide) on the My Aged Care Website <https://www.myagedcare.gov.au/how-much-will-i-pay>

This amount will be charged until confirmation is received by Rockpool RAC from the Department Services Australia (Centrelink) of the actual amount to be charged based on an assessment of the resident's income and assets.

DCF – Daily Care Fee

\$

The standard Daily Care Fee is set by the government and funds the cost of services provided by your home, such as meals and refreshments, personal care (such as bathing assistance) laundry, heating and air conditioning, cleaning and nursing care.

The maximum daily care fee is 85% of the single basic Aged Pension, which is reviewed every March and September by the Commonwealth Government.

Additional Services Fee

\$

This fee is for enhanced hospitality services offered by Rockpool RAC. The team will discuss with you the services available through Additional Services.

Permanent Admission Fees – FORM

Permanent Admission Fees and Charges Explained

Applicable to those deemed eligible to pay an accommodation charge:

Pre-Entry Leave Fee

\$

Pre-Entry leave is a period of up to seven days prior to the agreed admission date where the provider may charge the Daily Care Fee (See previous page) to secure the room while it remains vacant.

One off Payment

\$

This fee covers a package of services to help the resident and family settle into the home including test and tagging of personal electronic equipment, clothing labels and petty cash management.

PLEASE NOTE:

1. If the information provided to us to calculate 'interim' fees' is incorrect or altered and it is subsequently determined by us that you should pay an Accommodation Payment instead of an Accommodation Contribution, or that you must pay an Accommodation Contribution instead of being fully supported, your payments will be reclassified and recalculated with effect from your date of entry based on the maximum applicable charges.
2. If you are eligible to pay an accommodation payment, you have 28 days to decide your payment method. If your payment method is via lump sum (RAD/RAC) you have 6 months from the date of admission to submit the lump sum. A DAP/DAC will be charged until the full lump sum is received, the DAP/DAC is non-refundable.



Third Party RAD Payments

If a third party is considering making a monetary contribution towards the resident's RAD, please note the following:

1. Under the Subsidy Principles, RADs/RACs paid by a third party are treated as part of the resident's assets and may affect the resident's Income and Asset Assessment.
2. Under the Aged Care Act 1997, RADs / RACs will be refunded to the resident's estate upon receipt of Probate after the resident's death (or to the resident themselves in the event of discharge) – RADs / RACs will not be refunded to the third party who made the RAD contribution; unless prior legal documentation is provided and agreed upon in writing in the Resident's agreement under extra conditions.
3. Any third party who is considering making a contribution/paying a RAD/RAC on behalf of a resident is strongly advised to obtain independent legal and / or financial advice first.

Acknowledgement of Understanding the Fees

I confirm the above fees and charges have been explained to me:

Name:

Signature:

Date:

Clothing Tips

Personal Clothing Requirements

We recommend all residents should have enough clothing for at least one full week on the day they arrive. **May we put forward the following suggestions:**

Ladies

- ✓ Dresses
(anything that is comfortable)
- ✓ Skirts & Blouses
- ✓ General Clothing
(should be loose fitting around the waist)
- ✓ Nighties & Singlets
(minimum of 6 of each – summer & winter)
- ✓ 2 x Dressing Gowns
(summer & winter)
- ✓ Shoes
(should have non-slip soles, low heels & loose fitting to help with circulation)
- ✓ Slippers
(summer & winter)
- ✓ Pantyhose / Stockings
(appropriate for some residents)
- ✓ Underwear
(cotton made – at least 6 pairs)
- ✓ Sweaters / Jumpers / Cardigans
- ✓ Sun Hats
(mid-wide brimmed)
- ✓ Toiletries
- ✓ Coat Hangers
- ✓ Nail Care Kit

Men

- ✓ Trousers
(well fitting & machine washable)
- ✓ Track Suits
(are comfortable & functional)
- ✓ Shirts & Singlets
(minimum of 6 – made from cotton, flannelette for winter)
- ✓ Pyjamas
(6 pairs – summer & winter)
- ✓ Dressing Gowns
(summer & winter)
- ✓ Underpants & Socks
(a good supply is recommended)
- ✓ Shoes
(should be non-slip soles and loose fitting to help with circulation)
- ✓ Slippers
(summer & winter)
- ✓ Sweater / Jumpers / Cardigans
- ✓ Sun Hats
(mid-wide brimmed)
- ✓ Toiletries
- ✓ Coat Hangers
- ✓ Nail Care Kit
- ✓ Small Portable Mirror
(for shaving)

PLEASE NOTE:

- We will take all care, however, we bare no responsibility for the laundering of woollens and undergarments.
- We suggest any delicate items i.e. Woollens, silks or items that require hand washing should be laundered / dry cleaned by family.
- We trust that this information sheet is of some assistance to you. If you still have any questions, please contact the Admissions Team for further assistance.

Clothing Label Authority – FORM

Clothing Label Authority

I authorise the staff members in charge of the facility to approve or incur clothing label expense/s on my behalf and to charge such expense/s to my Resident account or pay by cash/cheque at Reception prior to the order being placed.

I agree that should more labels be required in the future, this charge may also be added to our account, or paid at Reception.

I agree that Rockpool Residential Aged Care and/or all its employees shall be indemnified from any legal action / proceedings arising out of such authorisation and where Rockpool Residential Aged Care and/or its employees have acted in good faith.

Charge Laundry Labels as follows:

(Please tick preferred payment option)

Pay at Reception by EFTPOS

Charge to account – to be added to account to be direct debited

Quantity of labels required: (50 or 100)

LABEL ORDERING PROCESS

- Initial order of clothing labels (50 or 100 labels only) at a cost of \$1.00 per label.
- Subsequent orders of labels can be in multiples of 10 or more. Should more labels be required in the future our administrative staff will contact you for approval. Cost of this order will be \$1.00 per label.
- Rockpool Permanent Residents will receive their first 50 labels at no additional cost. Any labels thereafter will be charged at \$1.00 per label.

Personal Clothing Requirements

- ✓ We recommend that the **most popular clothing be of the wash and wear variety.**
- ✓ **All clothing must be permanently marked, preferably with either sew-on or heat-sealed name labels.** You will receive complimentary heat-sealed name labels on admission.
 - **Our laundry staff will apply the heat-sealed labels to the resident's garments.** All clothing must be permanently marked, preferably with sew-on name tags if you are applying your own. This helps with resident's clothing identification. These tags should be attached to all clothing, footwear, accessories (handbags, toiletries bag etc) and personal bedding.
 - **Additional heat-sealed name tags can be purchased for a \$1 per label.** Should you wish to purchase name tags from our facility, please complete the enclosed "Clothing Label Approval Form" or alternatively, please notify Reception staff for additional labels. Additional heat-sealed labels will be applied to the resident's garments by our laundry staff.
 - **Indelible inks are not a permanent marking for the naming of clothes.**

REMINDER:

Should you bring any new items into the facility for a resident the carer in your community must be notified to label before being put away in the resident's room.



Definitions: Staff member in charge of the facility shall mean the Facility Manager / Director of Nursing / Hostel Manager of the facility or person acting in that capacity. Facility shall mean an aged care facility operated by Rockpool Residential Aged Care.

Mail Request / Test & Tag – FORMS

Resident Distribution of Mail Request Form

In order to service our Residents promptly, we need to distribute any mail that should arrive at Rockpool, would you please record where you would prefer the Resident's mail be sent.

Mail to go to the Resident's room

Re-direct to another person.

Please provide details for redirection to EPOA etc.:

Name:

Address:

Signature:

Electrical Equipment Test & Tag for Residents

If you bring any electrical equipment, it is a safety obligation that you have an electrical test and tag done on each item before you bring it in by a qualified electrician.

All electrical equipment must be tested and tagged by the date of admission and must not be used until this has been completed. This must be done by an authorised test and tag technician or by our contracted electrician which will be charged back to your account. Ongoing annual testing and tagging will be carried out by Rockpool as part of our annual test and tag protocol.

- ✓ **It must be tagged "safe for use" before it can be used.** Double adapters are NOT permitted, however power boards with circuit breakers can be used.
- ✓ **All electrical equipment must be test & tagged by the date of admission and must not be used until it has been completed.** Equipment has to get test & tagged by an authorized test & tag technician or by our contracted electrician which will be charged back to your account. Ongoing annual test & tagging will be carried out by Rockpool as part of their annual test & tag protocol.
- ✓ **These electrical checks will need to be completed and must be completed annually.**

OUR COMMUNITIES' SAFETY IS OUR TOP PRIORITY:

Our home may operate some important life-supporting equipment necessary for some residents, and we cannot risk a short circuit affecting any equipment.

Electrical Equipment to Test & Tag

Item:

Item:

Item:

Item:

Item:

Life reimagined



Rockpool Carseldine
56 Plaza Place
Carseldine Q 4034

Rockpool Morayfield
49 Amy Street
Morayfield Q 4506

Rockpool Pelican Waters
17 Spitfire Banks Drive
Pelican Waters Q 4551

Rockpool Songbird Oxley
Seventeen Mile Rocks Road
Oxley Q 4075

Call us on 1800 515 053 or email admissions@rockpoolrac.com