

Referral details:

Referral date Referrer's name

Organisation (or relationship to the person referred)

Referrer's phone number Mobile number

Reason for referral

Other services client receives

Health/mobility issues

Identified hazards in client's environment: please tick

None	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>
Animals	<input type="checkbox"/>	Neighbourhood	<input type="checkbox"/>
Client behaviour	<input type="checkbox"/>	Smoking	<input type="checkbox"/>
Family of client	<input type="checkbox"/>	Other	<input type="checkbox"/>
Hygiene	<input type="checkbox"/>		

If hazards identified please provide details

Please post form to the address on the back.

ageconcern.org.nz

Who can make a referral?

Health professionals, family or friends can refer an older person or couple to the AVS. Just be sure to ask their permission first.

Alternately, older people who would like a visitor can contact Age Concern themselves.

Our visitors are volunteers. We ask that referrers bear this in mind. Clients with moderate to severe cognitive issues or in a state of severe or rapidly deteriorating ill-health are likely to be outside the scope of the service.

AVS works!

Having a visitor can make a real difference to the health and happiness of an older person.

Befriending services have been shown to have a positive effect on depression. Regular surveys tell us that:

- 91% of AVS clients feel happier because of receiving the service
- 92% think of their visitor as a friend
- 86% feel less lonely
- 84% feel the service has made a positive difference in their lives.

Our clients tell us:

I can bank on my visitor coming Monday morning no matter what the weather is like. Sometimes she is the only person to visit from week to week

I was feeling lonely, with no light at the end of the tunnel, and didn't want to be here. Completely alone. No family. My visitor is a good listener, and we have become good friends. I look forward to her visits

Not so lonely, and feel I have a friend

We laugh so hard, our heads nearly blow off!

To refer an older person to the Accredited Visiting Service fill in the attached form and send to the address below or visit our website:



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ageconcern.org.nz

Do you know an older person who would like more company?

Ko te aroha te mea nui

Contact Age Concern



Age Concern Accredited Visiting Service (AVS) can help

What is the AVS?

The AVS is a befriending service aimed at reducing social isolation and loneliness amongst older people.

Why is it important?

Research shows that loneliness is as bad for health as smoking, and that social isolation almost doubles an older person's risk of going into residential care.

Who is it for?

AVS clients must be:

- Willing to be referred
- At risk of social isolation due to having no or very few regular visitors
- 65 and over in most cases
- Able to contribute to a mutually beneficial relationship
- Usually individuals, but may also be couples experiencing isolation, often when one is in a carer role.

What does the AVS do?

AVS visitors provide regular visits of about an hour per week, share interests and activities with clients, and support them, where possible, to make other community contacts.

What don't we do?

Visitors are there to provide social support. They are not allowed to do personal cares, housework, to handle medications or finances, or to do regular shopping.



Assessing risk

Older people experiencing the following are more at risk of loneliness and social isolation:

- Low income
- Poor health
- Living alone
- Lack of private transport
- Depression
- Bereavement.

What can you expect when you make a referral to the AVS?

- Clients accepted for the service will be contacted within two weeks
- Clients will be assessed, and matched with compatible visitors, subject to availability
- Matches will be regularly reviewed
- Some Age Concerns offer additional social support options such as group activities through the AVS
- The AVS coordinator will liaise as required with other agencies to address client needs outside the scope of the service.



Accredited Visiting Service Referral Form

(To make a referral please ask permission from the person in question, and fill out their details below).

Client contact information:

Title	Surname
<input type="text"/>	<input type="text"/>
First name	Middle name
<input type="text"/>	<input type="text"/>
Preferred name	<input type="text"/>
Home phone	Mobile number
<input type="text"/>	<input type="text"/>
D.O.B	Ethnicity
<input type="text"/>	<input type="text"/>

Address:

Unit number	Street number
<input type="text"/>	<input type="text"/>
Street name	<input type="text"/>
Suburb	<input type="text"/>
City	Post code
<input type="text"/>	<input type="text"/>

