Wellbeing Residential Application Form

PERSONAL INFORMATION

Surname:

Forenames:

D.O.B

Gender (please tick)

Male ☐ Female ☐

Current Police Force (if retired, previous force)

If serving

Date joined

Collar Number

If retired

Date of Retirement:

Police pension number:

Home Address:

Home telephone:

Mobile telephone:

Postcode:

Email:

NEXT OF KIN

Name

Relationship

Contact telephone number

DATES TO AVOID

(Please include all leave/holiday, court or other commitments)

WHICH APPLIES

Please indicate which of the following applies to the applicant (please tick)

Work ☐ Recuperative duties ☐ Restricted duties ☐ Sick leave ☐

Return email address: enquiries@nwpbf.org
Return postal address: The Ben Fund, St. Michael's Lodge, Northcote Road, Langho, Lancashire, BB6 8BG
Registered Charity No. 503045

HEALTH & WELLBEING

Does the applicant currently suffer from any mental health conditions? (please give a brief summary)

Previous or ongoing treatments in relation to this condition

Has there been any treatments that have been found successful?

What does the applicant hope to gain during their stay at St Michaels Lodge?

Does the applicant suffer from any physical pain? (please give a brief summary)

Has the applicant attended St Michaels Lodge before? Yes ☐ No ☐

If **YES**, please specify date:

Was this stay for the same condition? Yes ☐ No ☐

PERSONAL INFORMATION

Do you require an additional carer/nurse to attend with you during your stay? Yes ☐ No ☐

Do you have limited mobility i.e. use of a wheelchair/walking aids? Yes ☐ No ☐

Do you take medication Yes ☐ No ☐

Current medication

Do you have allergies/infections Yes ☐ No ☐

Do you have any dietary requirements Yes ☐ No ☐

Past medical history

CARER/NURSE DETAILS

Name:

Telephone No:

Limited Mobility: Yes ☐ No ☐

If **YES**, please state:

Medication Yes ☐ No ☐

If **YES**, please state

Limited Mobility: Yes ☐ No ☐

If **YES**, please state:

Dietary requirements: Yes ☐ No ☐

If **YES**, please state:

PERSONAL INFORMATION

The information which you supply to us may be used to make admission and clinical decisions; for audit and statistical analysis; for fraud prevention.

☐ I understand that all personal information on this form will be confidential to the professional and administrative staff of the NWPBF and no personal information or clinical reports will be shared without my express consent unless required by law.

☐ I agree to include any claim for damages pursued by me against the third party in respect of the accident resulting in my injury such as sums specified by the NWPBF.

☐ I agree to the NWPBF contacting me using the details I have provided

Signature

Date

INFORMATION

Name:

DOB:

CONSENT FORM - GYM, POOL, HOT-TUB, SAUNA, HOLISTIC TREATMENTS & CLASSES

ABSOLUTE CONTRAINDICATIONS	YES	NO	COMMENTS
Acute vomiting/diarrhoea	☐	☐	
Weight more than limit on evacuation equipment (25st)	☐	☐	
Proven chlorine allergy	☐	☐	
Severe medical condition, acute episode e.g. Heart Attack/Failure, Stroke, CVA (less than 3 months)	☐	☐	
Resting angina	☐	☐	
Shortness of breath at rest	☐	☐	
Uncontrolled cardiac failure or PND	☐	☐	

RELATIVE CONTRAINDICATIONS	YES	NO	COMMENTS
Acute systemic illness	☐	☐	
Irradiated skin during radiotherapy course	☐	☐	
Known aneurysm	☐	☐	
Poorly controlled epilepsy	☐	☐	
Unstable diabetes	☐	☐	
Open wounds	☐	☐	

PRECAUTIONS	YES	NO	COMMENTS
Epilepsy/Haemophilia/MRSA	☐	☐	
Pregnancy/Conjunctivitis/Vision Issues	☐	☐	
Hypotension/Hypertension	☐	☐	
Renal failure/Poor skin integrity	☐	☐	
Drop attacks/Fainting	☐	☐	
Poor mobility (walking aid etc)	☐	☐	

GUEST DECLARATION

Personal information which you supply to us may be used in several different ways, for example: To make admission and clinical decisions; for audit and statistical analysis; for fraud prevention.

The Ben Fund is committed to protecting your privacy and security. Whenever you provide personal information, we will treat that information in accordance with UK Data Protection legislation and Internet best practice. Further details can be found in our Privacy Policy which can be found on our website at: www.thebenfund.co.uk

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