

A decorative graphic on the left side of the page consists of a grid of overlapping squares. The top-left square is light green. The middle-left square is red. The middle-right square is light green. The bottom-right square is red. The bottom-left square is light green. The bottom-most square is light green.

# HSE Home Support Service for Older People

## Application Form

2018

## Application Form

You can use this form to apply for the Home Support Service. Home Support provided by the HSE aims to help an older person to be cared for in their own home. Completed forms should be returned to your local HSE Home Support Office. Staff in that office can also help you to complete your application. Contact details for HSE Home Support Offices are provided on the last page of this form. Before completing this form, you can read more detailed information on the service in the Home Support Service Information Booklet.

### Part 1-Your Details – Please use BLOCK capitals

NAME OF APPLICANT:																			
Home Address:																			
Eircode:																			
Date of Birth:				D	D	M	M	Y	Y	Y	Y	Gender:				Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Daytime phone number												Mobile or alternative phone number							
GP NAME:									PUBLIC HEALTH NURSE NAME:										
Address:									Address:										
Telephone Number:									Telephone Number (if known):										
IF LIVING WITH RELATIVES/IN A HOSPITAL/NURSING HOME, STATE CURRENT ADDRESS:																			
IF IN A HOSPITAL/NURSING HOME, PLEASE ALSO COMPLETE THE FOLLOWING:																			
1. Name of Ward/Unit:																			
2. Date of admission:																			
3. Expected date of discharge:																			
4. Medical Record Number:																			

#### FAMILY/INFORMAL SUPPORT CONTACT DETAIL (someone you trust to assist you):

FAMILY MEMBER CONTACT NAME:										Relationship to Applicant:							
Address:																	
Eircode:																	
Telephone Number:																	
NAME AND TELEPHONE NUMBER OF THE PERSON WHO WILL HELP YOU MAKE ARRANGEMENTS FOR YOUR HOME SUPPORT:																	
Relationship to Applicant:																	

# Department of Social Protection Supports

Is Carers Allowance/Carers Benefit/Respite Care grant currently being paid to someone to care for you?

Yes

No

If Yes, please state what type of payment(s)?

Does the person live with you at your current address?

Yes

No

**If no allowance is being paid, it may be that your family carer should apply for one of these supports. More information is available from your local Department of Social Protection, Social Welfare Office. Contact details are available on [www.welfare.ie](http://www.welfare.ie)**

## Declaration and Consent

1. I wish to apply for the Home Support Service. I understand that this application is for support in my home and if my assessed needs can be met from other community services e.g. Day Care, Meals on Wheels etc. then I may not receive home support at this time.

Signed \_\_\_\_\_ Date \_\_\_\_\_

2. As part of this application, I understand that I am also giving consent for the HSE to make arrangements for a Care Needs Assessment to be undertaken. Any organisation with information relevant to my care needs may provide the HSE with this information. The content of the Care Needs Assessment report and other relevant Home Support documentation may be provided to, or shared with, relevant health professionals and external Home Support Providers, if required.

The signature below indicates consent to a Care Needs Assessment and the provision and sharing of my Care Needs Assessment and other relevant Home Support documentation with relevant health professionals and external Home Support Providers.

To comply with Data Protection legislation, the HSE wishes to advise that information supplied in the application form will be recorded on a computer system. The HSE Privacy Notice for Patients and Service Users is available from your local Home Support Office or on [www.hse.ie/eng/gdpr/hse-data-protection-policy/hse-privacynotice-service-users.pdf](http://www.hse.ie/eng/gdpr/hse-data-protection-policy/hse-privacynotice-service-users.pdf)

The HSE will treat all information and personal data provided to them as confidential. The HSE will only disclose information or personal data to other people or bodies according to the law.

3. I am aware that I must report to the HSE, immediately, any changes in my circumstances which may affect my Home Support Service, i.e. admission to hospital, availing of respite care, a period away from home to stay with family members or if I am able to manage at home without supports.

I have read and understand the information relating to Consumer Directed Home Support (CDHS). If HSE staff are not available to deliver my Home Support, and if I meet the criteria for CDHS, I wish to avail of this approach to the delivery of my Home Support.

Yes

No

I confirm that I have read and understand this application form. I have read the statement above and I confirm that the information given by me on this form is correct to the best of my knowledge and belief.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Part 2 – To be completed only where the person who may need Home Support is unable to make this application him/herself

I, \_\_\_\_\_ hereby wish to apply for/refer \_\_\_\_\_ for home support as it appears he/she may need home support in order to remain at home; he/she wishes to remain at home and is unable to make the application on his/her own behalf due to \_\_\_\_\_.

I have discussed the application with him/her and I have informed them that this application is being made.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of person applying on behalf of client (in BLOCK Capitals)																				
Address:																				
Eircode:																				
Date	D	D	M	M	Y	Y	Y	Y	Phone Number											
If this application is being made by anyone other than the client or his/her representative, please tick the appropriate box below:																				

**A note for Healthcare Professionals:** In circumstances where the healthcare professional has (a) established a lack of capacity (including a lack of capacity to consent to the sharing of information and/or to a care needs assessment) and has (b) established the application is the “will and preference” or in the “best interests” of the applicant, please keep a record in your clinical notes how you reached your conclusion.

SOURCE OF REFERRAL (PLEASE TICK – identifying where applicant is resident on date of application)

Community

Acute Hospital

Other (specify)

Name of Location												
Date	D	D	M	M	Y	Y	Y	Y				

Completed forms should be sent to your local HSE Home Support Office. Staff in that office can also help you to complete your application.

Local Health Office	Home Support Office Address
Cavan	Home Support Service, Services for Older People, HSE, Community Care, Lisdarn Community Services Building, Cavan Hospital Complex, Cavan Tel: 049-4373131/4373141/4373142/4373197
Carlow / Kilkenny	Home Support Service, Services for Older People, HSE, Community Services, James' Green, Kilkenny Telephone: 056-7784735
Clare	Home Support Service, Services for Older People, HSE, St. Joseph's Hospital, Lifford Road, Ennis, Co. Clare Telephone: 065-6863858/6863859/6863812
Cork – North Cork	Home Support Service, Services for Older People, HSE, Room 52, Floor 1, Block 8, St. Finbarr's Hospital, Douglas Road, Cork Telephone: 021-4923959
Cork – North Lee	Home Support Service, Services for Older People, HSE, Room 52, Floor 1, Block 8, St. Finbarr's Hospital, Douglas Road, Cork Telephone: 021-4923959
Cork – South Lee	Home Support Service, Services for Older People, HSE, Room 52, Floor 1, Block 8, St. Finbarr's Hospital, Douglas Road, Cork Telephone: 021-4923864
Cork – West Cork	Home Support Service, Services for Older People, HSE, Room 52, Floor 1, Block 8, St. Finbarr's Hospital, Douglas Road, Cork Telephone: 021-4923864
Donegal	Home Support Service, Services for Older People, HSE, Donegal PCCC, St. Joseph's Hospital, Stranorlar, Lifford P.O., Co. Donegal Telephone: 074-9191736/9191735/9191739
Dublin North	Home Support Service, Services for Older People, HSE, Fujitsu House, Unit 100, 1st Floor, Lakeshore Drive, Airside Business Park, Swords, Co. Dublin Telephone: 01-8953760
Dublin North Central	Home Support Service, Services for Older People, HSE, 1st Floor, Ballymun Health Care Facility, Ballymun Road, Dublin 9 Telephone: 01-8467126/8467132/8467336
Dublin North West	Home Support Service, Services for Older People, HSE, Ground Floor, Unit 4 & 5, Nexus Building, Block 6A, Blanchardstown Corporate Park, Dublin 15 Telephone: 01-8975170
Dublin South City	Home Support Service, Services for Older People, HSE, Junction House, Kilnamanagh-Tymon Primary Care Centre, Airton Road, Tallaght, Dublin 24 Tel: 01-9214719/9214720/9214721/9214722
Dublin South East	Home Support Service, Services for Older People, HSE, Vergemount Hall, Clonskeagh, Dublin 6 Telephone: 01-2680570
Dublin South West	Home Support Service, Services for Older People, HSE, Junction House, Kilnamanagh-Tymon Primary Care Centre, Airton Road, Tallaght, Dublin 24 Tel: 01-9214719/9214720/9214721/9214722
Dublin West	Home Support Service, Services for Older People, HSE, Junction House, Kilnamanagh-Tymon Primary Care Centre, Airton Road, Tallaght, Dublin 24 Tel: 01-9214719/9214720/9214721/9214722
Dun Laoghaire	Home Support Service, Services for Older People, HSE, Dun Laoghaire Local Health Office, Tivoli Road, Dun Laoghaire, Co. Dublin Telephone: 01-2365200

Local Health Office	Home Support Office Address
Galway	Home Support Service, Services for Older People, HSE, Lá Nua, Castlepark Road, Ballybane, Galway Telephone: 091-748474/546062/546353
Kerry	Home Support Service, Services for Older People, HSE, Rathass Health Centre, Rathass, Tralee, Co. Kerry Telephone: 066-7184555
Kildare/West Wicklow	Home Support Service, Services for Older People, HSE, Junction House, Kilnamanagh-Tymon Primary Care Centre, Airton Road, Tallaght, Dublin 24 Tel: 01-9214719/9214720/9214721/9214722
Laois / Offaly	Home Support Service, Services for Older People, HSE, Primary Care Centre, Connolly Street, Mountmellick, Co. Laois Telephone: 057-8697515
Limerick	Home Support Service, Services for Older People, HSE, Front Building, St. Camillus' Hospital, Shelbourne Road, Limerick Telephone: 061-483648/483657/483776
Longford / Westmeath	Home Support Service, Services for Older People, HSE, Primary Care Centre, Harbour Road, Mullingar, Co. Westmeath Telephone: 044-9353757
Louth	Home Support Service, Services for Older People, HSE, Oriel Suite, St Brigid's Campus, Ardee, Co. Louth Telephone: 041-6859200
Mayo	Home Support Service, Services for Older People, HSE, St. Mary's H.Q., Castlebar, Co. Mayo Telephone: 094-9049177
Meath	Home Support Service, Services for Older People, HSE, Floor 1, Beechmount Shopping Centre, Trim Road, Navan, Co. Meath Telephone: 046-9037778/9037781/9037782
Monaghan	Home Support Service, Services for Older People, HSE, Primary Care Services, Rooskey, Monaghan Telephone: 047-39045/39048/30437
Roscommon	Home Support Service, Services for Older People, HSE, Government Buildings, Convent Road, Roscommon Telephone: 090-6637520/6637522
Sligo / Leitrim	Home Support Service, Services for Older People, HSE, Markievicz House, Barrack Street, Sligo Telephone: 071-9155195
Tipperary - North / East Limerick	Home Support Service, Services for Older People, HSE, Health Centre, Tyone, Nenagh, Co. Tipperary Telephone: 067-46440/46452/46462
Tipperary – South	Home Support Service, Services for Older People, HSE, Clonmel Community Care Centre, Western Road, Clonmel, Co. Tipperary Telephone: 052-6187681
Waterford	Home Support Service, Services for Older People, HSE, Community Services, Cork Road, Waterford Telephone: 051-842986/842899
Wexford	Home Support Service, Services for Older People, HSE, Community Services, Upper George's Street, Wexford Telephone: 053-9185746
Wicklow	Home Support Service, Services for Older People, HSE, Block B, Civic Centre, Bray, Co. Wicklow Telephone: 01-2744164