



ROSE LODGE
COMMUNITY AGED CARE

PRE ADMISSION PACK

Please retain this booklet for your reference and personal records.

Sign and date the acknowledgment and application and bring it with you to your interview with our Admissions Officer.

Welcome to Rose Lodge

Thank you for choosing Rose Lodge.

This information booklet is available to assist you during the Permanent and Respite admission process.

This kit includes information about our residential care and accommodation services.

This Information Booklet contains the following information:

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General Information

Waiting List

To be placed on our waiting a copy of a current Aged Care Assessment (ACA) is required. An appointment can then be made with the Manager for potential residents and families to discuss all aspects of our service delivery. A tour of the facility can be conducted at this time.

Rose Lodge requires a copy of the Financial Assessment returned from Centrelink prior to the offer of Permanent Placement. The "Permanent Residential Aged Care Request for a Combined Assets and Income Assessment" form can be obtained from Centrelink or from Rose Lodge.

People offered a place have the opportunity to decline and to be reconsidered for the next vacancy.

My Aged Care - Approved Needs Assessor

The government requires that an Approved Needs Assessor from My Aged Care must approve all people who enter an Aged Care Facility whether permanently or for respite. Your local doctor can arrange an Aged Care Assessment or self referrals can be made by calling 1800 242 696, or My Aged Care on 1800 200 422

Respite

The government will allow respite of up to 9 weeks or 63 days per year taken as one period or several smaller periods.

At Rose Lodge, it is our policy that anyone seeking a permanent placement must first complete a period of respite care. This allows our team to assess whether we can meet the individual's care needs and ensure that Rose Lodge is a suitable and comfortable long-term home. Due to high demand and limited availability, respite stays must be booked well in advance.

Further Enquiries

For further enquiries please contact the Admissions Officer.

Our Mission Statement

To provide high-quality aged care for the residents of the Bass Coast Community.

Our Vision Statement

To be the provider of choice for our community by striving for excellence in service delivery.

Our Values

Community, Respect, Wellbeing, Accountability and Partnership.

Commitment to Quality

- To respect and consult with residents in their choice of how they would like their care.
- To help maintain resident's independence and enjoyment of life through considered risk taking.
- To provide quality residential services that meets the expectation of the community.
- To provide care that is culturally appropriate and safe for all residents.
- To ensure diversity is welcomed at the Lodge and care is inclusive of their needs

Resident Security of Tenure

Resident Agreement

All residents are required to sign a Resident Agreement, which outlines their rights to reside at Rose Lodge and explains the procedures that would be followed should a resident be asked to leave.

To support open communication and continuous improvement, we offer a platform for residents and/or their representatives to raise any concerns. In addition, a comprehensive care review is conducted every six months in consultation with the resident and their representative, where possible. This evaluation covers all aspects of care, including communication, mobility, continence management, dietary needs, palliative care preferences, behaviour, personal hygiene, social and religious preferences, cultural needs, activities, medications, fees and charges, and the living environment. Care Plans are updated as needed to reflect any changes.

Each resident is provided with a private room and en-suite. We do not routinely move residents between rooms once they have settled, unless a change in care needs requires it—for example, if specialised equipment is needed. In such cases, any relocation is done in consultation with the resident and their family.

At Rose Lodge, we are committed to treating every resident as an individual. While balancing the needs of the broader community, our staff work diligently to meet each person's unique requirements. We take pride in creating a warm, welcoming environment that feels like home—not an institution. This approach is consistently reflected in our resident surveys, which show high levels of satisfaction and contentment.

Comments and Complaints

If a resident or relative has any complaints concerning the services or accommodation being provided, they may raise the complaint with Senior Management by filling out a Continuous Improvement Form. This can be done at reception or via our website. If contact details are provided, a return letter will be issued upon receipt.

If the complaint is not satisfactorily resolved within 30 days from the date of submission of the complaint, the resident may submit a written complaint to the President of the Board. The written complaint should include:

- The nature of the complaint.
- The date the complaint was first raised with Senior Management.
- Why the Resident is of the view that the complaint has not been satisfactorily resolved.

Following receipt of the written complaint, the President or his or her duly authorised representative, shall discuss the complaint with the resident and senior management, further investigate the complaint (if necessary) and make recommendations as to what actions would be necessary to resolve the complaint.

If the resident is not satisfied with the recommendations of the President, the complaint or dispute may be referred to the Aged Care Quality and Safety Commissioner.

GPO Box 9819 Melbourne

(telephone 1800 951 822)

www.agedcarequality.gov.au

A brochure is always available in the main corridor.

The Older Persons Advocacy Network (1800 700 600)

www.opan.com.au

Smoking Policy

The Rose Lodge Board has directed that smoking is not permitted within the Rose Lodge building. Smoking is permitted during the day in the designated smoking areas only (2 areas). No smoking applies after the building is locked at night and the alarms are on.

If you wish to smoke, staff will undertake an assessment to determine your preferences, and your doctor will be advised. Staff will monitor your ability to smoke safely. If staff identify you can no longer safely smoke, they will consult with you and/or family along with your doctor to discuss alternative options.

Please adhere to the following guidelines when choosing to smoke:

- You must keep your cigarettes safely locked in your room, or staff can securely store them in the consulting office
- You can only smoke in the designated areas
- Please use the ashtrays provided
- Please advise staff immediately if assistance is required
- Always respect your surrounding environment and others

Wi-Fi

Wi-Fi is available plus there are 2 Broadband for Seniors computers available with internet for use by residents.

Flu Vaccination

While it is no longer mandatory, we strongly encourage all residents entering an aged care home to have received the current Flu Vaccination.

If you have had your vaccination, please bring a **formal immunisation record** with you when entering Rose Lodge. This will be recorded during your initial visit.

Acceptable documentation includes:

1. A statement or record from your health practitioner, or
2. An immunisation history statement from **Medicare online**

The Australian Government Chief Medical Officer recognises medical exemptions for individuals who have:

- A history of anaphylactic reactions
- Guillain–Barre Syndrome, or
- Are currently on checkpoint inhibitor drugs for cancer treatment

If you fall into one of these categories, we kindly ask that you provide supporting documentation from your **GP or an approved medical authority**.

Accommodation Services

The following is a summary of the accommodation services provided at Rose Lodge.

1. General admission including maintenance of resident documentation

2. Maintenance of all buildings and grounds

3. Electricity and water services

4. Furnishings

Dining, lounge and recreational furnishings, plus room curtains and built-in wardrobes.

5. Cleaning services, goods and facilities

Maintain cleanliness and tidiness of the Care Facility.

6. Safe disposal of organic and inorganic material

7. General laundry

Provision of heavy laundry facilities and services as well as the provision of personal laundry services including laundering of machine washable clothing. However, this excludes cleaning of clothing that requires hand washing, dry cleaning or other special cleaning processes and personal laundry where a resident chooses and is able to do themselves.

8. Provision of bath towels, face washers and toilet paper

9. Meals and refreshments

9.1 Provision of meals of adequate variety, quality, and quantity for each resident, served each day at 8am, 12noon and 5pm, plus morning tea, afternoon tea and supper.

9.2 Supply of special dietary requirements having regard to either medical needs or religious or cultural observance.

9.3 Provision of food, including fruit of adequate variety, quality and quantity and non-alcoholic beverages, including fruit juices.

10. Resident social activities

Provide programs to encourage residents to participate in social activities that promote and protect their dignity and to participate in community life outside the facility.

11. Emergency assistance

At least one responsible person is continuously on call and within reasonable proximity to render emergency assistance.

12. Electrical appliances – Tag and Testing

It is a government requirement that all electrical appliances used by residents be tested annually for safety. Rose Lodge will organise the annual 'Test & Tag' thereafter, charged to the resident or their representative.

13. Electrical items

Residents may bring in some **approved** personal electrical equipment such as hair dryers, bedside clocks, bedside lamps, radios, television, electric recliner chair or shaver.

Electrical equipment is not to be used until it has been tested and tagged by Rose Lodge maintenance staff. The cost of testing and tagging is the responsibility of the resident or representative. This is conducted annually.

- ❖ Double adaptors are not permitted, power boards for use must be approved by maintenance staff.
- ❖ Air-Conditioners are throughout the communal areas and the corridors of Rose Lodge. Ceiling fans are permitted to be installed by the residents or their representative after written approval is given by the CEO.
- ❖ Portable evaporative coolers are **NOT PERMITTED** for health reasons.
- ❖ Kettles, irons, portable electric heaters, heated blankets/throws, toasters, microwaves, lithium batteries etc are **NOT PERMITTED** in resident's rooms for safety reasons.
- ❖ Communal fridges are available for use by residents. Individual fridges in resident's rooms are available to hire from Rose Lodge for a small monthly fee.
- ❖ Electric blankets or any other electrical heating pads are not permitted under any circumstances for safety reasons.
- ❖ TV and recliner chairs to be provided by permanent residents/family members.

The type of equipment and number of electrical items permitted in a resident's room will be regularly reviewed. This is part of our Workplace Health and Safety Program.

14. Wound care dressings

The cost of wound care dressings provided is charged to residents where appropriate. (see below). The items are purchased at wholesale and the savings passed on to residents.

15. Motorised Mobility Scooters and Electric Wheelchairs

1. Electric wheelchairs are permitted in the Lodge although a competency assessment must be undertaken, and a license issued by an RN to operate one within the building for safety reasons.
2. Scooters/Segways are not permitted to be used in the building. Charging facilities are provided in scooters bays.
3. A bay must be relinquished before another scooter can be brought into the Lodge's grounds.
4. Scooters are solely the residents' responsibility. Rose Lodge takes no liability for operation of a scooter inside or outside our facility.
5. A competency may be required before you can bring a scooter into our grounds. All insurance/repairs/maintenance is the responsibility of the resident.

16. High care residents

These residents are provided with incontinent aids, wound dressings, podiatry and physiotherapy without being charged. For full details refer to www.comlaw.gov.au/Detail/F2014L00830

Residential Care

The following is a summary of the care provided at Rose Lodge.

1. Assistance in activities of daily living

Personal assistance, including individual attention, supervision and physical assistance with:

- 1.1 Bathing, showering, personal hygiene and grooming.
- 1.2 Maintaining continence or managing incontinence, the use of aids and appliances designed to assist continence management.
- 1.3 Eating, use of eating utensils, eating aids and the provision of eating aids.
- 1.4 Dressing, undressing, the use of and provision of dressing aids.
- 1.5 Moving, walking, wheelchair use, and the use of devices and appliances designed to aid mobility, including the fitting of artificial limbs and other personal mobility aids.
- 1.6 Communication, including addressing difficulties arising from impaired hearing, sight and speech or lack of common language (Including the fitting of sensory communication aids) and checking hearing aid batteries and cleaning spectacles.

But excludes hairdressing.

2. Meals and refreshments

A four-week seasonal menu provides a variety of nutritious meals reviewed by a Dietician. Special dietary requirements are also catered for.

3. Emotional support to and supervision of residents

The Lodge has a volunteer counsellor available through Lifestyle who is available to visit residents and provide emotional support or just being there for someone to talk to. Signs are also around the building for resident and family support services provided by Bass Coast Healthcare for families who may be struggling with the process of Aged Care.

4. Treatment or procedures

Treatment or procedures that are carried out according to the instructions of a health professional or a person responsible for assessing a resident's personal care needs, including supervision and physical assistance with taking medications, and reordering medications, as necessary.

5. Recreational therapy

Recreational activities suited to residents, assistance with participation in those activities and the provision of communal recreational equipment.

6. Rehabilitation support

The provision of, and assistance with, individual therapy programs designed by health professionals aimed at maintaining or restoring a resident's ability to perform daily tasks for themselves, or assistance to obtain access to such support.

7. Assistance in obtaining health practitioner services

Arrangements for aural, community health, dental, medical, psychiatric and other health practitioners to visit residents, whether the arrangements are made by residents, relatives or other persons representing the interests of residents. Or are made directly with a health professional.

8. Assistance in obtaining access to specialised therapy services

Arrangements for speech therapy, podiatry, occupational or physiotherapy practitioners to visit residents, whether the arrangements are made by residents, relatives or other persons representing the interests of residents.

9. Support for people with cognitive impairment

Individual attention and support to residents with cognitive impairment (e.g. dementia and other behavioural disorders). This would include individual therapy activities and specific programs designed and carried out to prevent or manage a particular condition or behaviour and to enhance the quality of life and care for such residents and ongoing support (including specific encouragement), to motivate or enable such a resident to participate in general facility activities.

Labelling of Clothes

Rose Lodge requires all residents' clothing to be labelled to avoid items of clothing being misplaced or lost. Rose Lodge can provide special thermo labels which are heat sealed onto all clothing at a **cost to the resident of \$1.10 per label inclusive of GST.**

If you wish to label your own clothing, please make sure they are sewn on.

Delicate articles of clothing should not be sent to the laundry at the Lodge. We use industrial machines at high heat that will shrink or destroy delicate articles of clothing (e.g. cashmere or pure wool jumpers). For this reason, woollens and dry cleanable only clothing are the responsibility of the Resident and family.

Rose Lodge does not accept any liability for articles that do not comply with the stated washing requirements above.

Electrical Tagging

Tagging of all electrical equipment in Rose Lodge is a requirement under our Occupational Health and Safety Regulations and must be carried out on a regular basis.

All approved electrical equipment brought into Rose Lodge by residents must be checked and tagged prior to use. Management must be informed of any new electrical equipment brought into Rose Lodge and reserve the right to refuse permission for unsuitable equipment or equipment that is banned.

A tag is fitted to each appliance indicating the frequency of tagging and the date it is due for re-tagging. This is recorded on file and kept in our office. Our Maintenance Officer is qualified to carry out all checking and tagging of electrical equipment on an annual basis. If electrical tagging has expired on equipment, it will be necessary for the equipment to be retagged for continued use.

The cost for this tag and test service is \$5.50 per item inclusive of GST and is payable to Rose Lodge.

Resident Telephone

Residents may request a telephone option in their rooms.

The telephone provided is the basic large button Telstra phone, with the option to be directly dialed to and from the room.

There is an initial connection & set-up charge of \$50 and an ongoing monthly charge of \$50 for usage. This can be billed along with the residents' monthly fees & charges.

Newspaper

Newspapers can be organized upon request. Please note this comes at the expense of the resident.

Coming into Rose Lodge

All new respite and permanent residents are required to complete and return a "PRE- ADMISSION APPLICATION" prior to the admission date.

Items to Consider

CLOTHING:

Neat casual clothing.

All clothing must be marked with your name using thermo-sealed labels (these are not normal iron on labels).

Rose Lodge will undertake the washing of labelled clothes whilst you are a resident, except for hand washed garments which remain your responsibility. You may choose to send your washing home with a relative or friend if they are not labelled.

MEDICATION:

All medications at Rose Lodge are packed by our local supplying pharmacy for permanent residents or pharmacy of choice. Please ensure you bring completed medication chart and all current medications in a blister pack **prior to admission day**. Excluding any creams, ointments, inhalers, eye drops etc. you are currently using, and relevant scripts bring with you on day of admission.

If you are prescribed oxygen therapy, please ensure you bring all your oxygen supplies and equipment and ensure your equipment is serviced/checked before coming to Rose Lodge.

TOILETRIES: (toiletries are not provided). Residents to provide the following suggested items:

- *Hairbrush/comb
- *Incontinence pads if required (Respite to provide/Permanent are provided)
- *Toothpaste
- *Deodorant

ELECTRICAL:

Please bring in a 4-way power board if you are intending to use a TV, DVD and any other electrical items.

WHEAT PACKS:

Many people use Wheat Packs for heating up for sore/painful areas. **Wheat packs are very dangerous and have been the cause of many fires from constant heating.** Wheat packs are banned from Rose Lodge, and we ask and recommend that if you require a Pack use a Gel Pack instead. We have found that the recommended [Therabeads Heat Therapy pack](#) is hard wearing, safe and lasts a long time.

HAIRDRESSER:

The hairdresser visits once a week and you may book an appointment. There is a cost to you for this service.

VISITOR'S MEALS:

You may invite up to 2 guests to have a midday meal with you (main meal and sweets). There is a charge of **\$10.00** inc. GST for each visitor's meal, subject to increase.

Please note we cannot provide a meal on short notice and therefore would appreciate notification of your intention at least 24 hours in advance or no later than 10.00am on the day you would like a visitor to join you. For catering purposes please contact reception.

The café is open on some days throughout the week. There is no cost to residents, however family members and visitors pay \$2.00 for their beverage and cake/biscuit.

PENSION & MEDICARE CARDS:

You will need to bring your pension, Medicare Card and Private Health Fund cards with you.

MOBILITY AIDS:

Please ensure your walking frame and/or walking stick is clearly marked with your name and is in good condition.

Residents who wish to bring their mobile scooter to Rose Lodge must be assessed by our Physiotherapist or Occupational Therapist as to their competency to operate the scooter. Residents are not permitted to bring mobile scooters into the building. These are to be stored in the scooter bay located on the Graham Street level.

Note: You require permission to bring a scooter with you as there must be a vacancy in the scooter bay for you to bring a scooter to the Lodge.

MAIL SERVICE:

Incoming mail will be personally delivered to residents daily (Monday to Friday).

Outward mail can be posted in the red mailbox in the Graham Street entry foyer of Rose Lodge or handed to Reception on the upper level. Please note that postage fees may apply.

RESIDENT PETTY CASH:

We offer a secure petty cash service for residents who wish to keep small amounts of money on hand. Residents can access their funds at any time by contacting reception. These funds can be used for internal services as well as external outings.

VISITORS:

All visitors are required to record their attendance and departure for safety and security reasons.

Residents are encouraged to use the lounges/tea making areas within the facility when entertaining visitors.

Acknowledgement – Please sign & return this form to the Admissions Officer

I acknowledge that I have received and reviewed the Rose Lodge Information Booklet. I understand the content, policies, procedures, and expectations outlined within and agree to comply with them as required.

By signing this form:

- I confirm that I have read and understood the contents of the Information Booklet.
- I agree to abide by the policies and guidelines described in the booklet.
- I understand that the booklet is not a contract of residency and that Rose Lodge reserves the right to modify or amend the policies at any time.
- I am aware that it is my responsibility to ask questions or seek clarification on any information I do not understand.

If any changes are made to the handbook in the future, I understand that I may be required to review and acknowledge those updates as well.

Name: Date:/...../.....

Signature:

Smoking Policy

I, _____, have read and understood the smoking policy and agree to follow the guidelines as stated.

Signature: Date:/...../.....

Clothing labels

YES, I wish to Opt In for Rose Lodge clothing labels ☐

NO, I wish to Opt Out for Rose Lodge clothing labels ☐

I, _____, consent to the ordering of labels and agree to pay Rose Lodge for the associated costs of this service.

Signature: Date:/...../.....

Telephone Option

YES, I wish to Opt In for the Phone Option ☐

NO, I wish to Opt Out for the Phone Option ☐

I, _____, consent to the fees related to the setup and ongoing maintenance of having a phone.

Signature: Date:/...../.....

Electrical Tagging

YES, I wish to Opt In for Rose Lodge electrical tagging ☐

NO, I wish to Opt Out for Rose Lodge electrical tagging ☐

I, _____, give my consent to Rose Lodge Maintenance to perform testing and tagging of electrical equipment, and I agree to be responsible for any fees associated with this service.

Signature: Date:/...../.....

My Health Record

I, _____, give my consent to Rose Lodge to upload my health and wellbeing information to My Health Record.

Signature: Date:/...../.....

National Aged Care Quality Indicator Program

All Australian Commonwealth subsidised residential aged care services are required to participate in the National Aged Care Mandatory Quality Indicator Program (QI Program) which enables the service to use meaningful and measurable quality indicators to monitor and improve important aspects of care.

We are seeking your consent to participate in the collection of information related to pressure injuries and unplanned weight loss. Information for these indicators is collected by a staff member using the following methods:

- Pressure injuries - A 3 monthly full-body observation assessment for pressure injuries conducted as part of usual personal care.
- Unplanned weight loss - Monthly weights are used.

Once information is collected it is submitted into a My Aged Care portal as de-identified data, every 3 months. Your privacy is protected as the information submitted does not contain any identifying information about you.

Reports provide the results for our organisation. This information is then used in our quality improvement program to assist us to improve the quality of care and quality of life for consumers in our care.

Do you consent to participate in the collection of information related to pressure injuries and unplanned weight loss? If yes, specify:

YES	NO

- ☐ Pressure injuries – 3 monthly full-body observation assessment
- ☐ Unplanned weight loss – monthly weighs

Comment:

Residential Medication Management Review (RMMR)

A RMMR is a Medicare funded service available to all permanent residents of residential aged care facilities who have a current Medicare/DVA card.

The RMMR involves a comprehensive assessment to identify, resolve and prevent medication-related problems with the aim to improve quality outcomes and quality of life for consumers. The review is conducted by an accredited pharmacist upon the request by a consumer's general practitioner (GP) and conducted in collaboration with the consumer's GP and appropriate members of the consumer's healthcare team.

Information used during a RMMR includes; a list of current medications, a summary of medical conditions, relevant test results, relevant health status, weight, height, body mass index, date of birth, any medical practitioner concerns, relevant lifestyle, and cultural information.

A report is written and provided to the treating medical practitioner and changes made as appropriate in consultation with the consumer/representative.

Do you consent for a specialist pharmacist to be provided with relevant information and to conduct comprehensive Medication Reviews?

YES	NO

If yes, I consent for the Medication Review report to be shared with relevant health care team members who maybe caring for me:

- ☐ Medical practitioner and their locum
- ☐ Nursing staff
- ☐ Allied Health Professionals as relevant e.g. Dietician, Physiotherapist
- ☐ _____

Consent given by:	
Name	Relationship to consumer

Consent – Please sign & return this form to the Admissions Officer

I acknowledge that personal and health information collection is required for the purposes outlined in this booklet and will only be disclosed to third parties required by law. I understand that this consent only applies to how my personal and health information is handled, not my medical/dental treatment.

I consent to information about my health and wellbeing being shared with NOK ☐

I consent to display respectful images/photos within the aged care community ☐

I consent to sharing the details of my birthday (i.e. announcement on notice boards) ☐

I consent to participate in outings planned and provided by staff/volunteers ☐

I consent to attending the onsite hairdresser and paying the fee accordingly ☐

I consent to participate in the collection of information related to pressure injuries and unplanned weight loss ☐

I consent to a specialist pharmacist to be provided with the relevant information and to conduct comprehensive Medication reviews ☐

I consent to the sharing of the Medication review with the relevant health care team members who are caring for me ☐

Name: Date:/...../.....

Signature:

Application for Admission to Residential Care

Thank you for choosing Rose Lodge.

Please note permanent admission to Rose Lodge requires an appointment with the Admissions Officer before proceeding with your admission.

Prior to your appointment you should:

1. Contact My Aged Care to complete an assessment. You will need referral codes for your appointment
2. Make an appointment with your local Doctor to obtain a Medication List, Health Summary & Note of Ability (if applicable)
3. Make an appointment with Services Australia to collect your Income & Assets Assessment (Please note this can take up to 6-8 weeks)

How to complete your application

Here's a step-by-step checklist to support your application process.

Review & complete the application

- ☐ Application complete
- ☐ Information booklet signed & dated
- ☐ Fee information read & understood

Provide additional documents

- ☐ A copy of your **Aged Care Reference Codes** (these can be found on the My Aged Care website/calling My Aged Care/on the assessment letter mailed to you)
- ☐ A certified copy of **all relevant authorities** (e.g. Power of Attorney, Financial Power of Attorney, Medical Treatment Decision Maker, Guardian, Administrator)
- ☐ A copy of your **Medication List & Health Summary** from your Doctor
- ☐ A completed copy of the **Advanced Care Plan/Directives**
(Form will be included in this pack)
- ☐ A completed **Medication Chart**
(Form will be included in this pack)

Attend Interview with our Admissions Officer

- ☐ Bring this booklet and all other completed documents with you when you attend your interview with our Admissions Officer

Please note: *A current and correct Medication Chart & Webster Packs are required 1 week prior to Admission Day. A medication chart can be collected at Rose Lodge and a Doctor's appointment will be required*

Please use block letters and where indicated place a ✓ in the appropriate box

TYPE OF CARE			
☐ Permanent		☐ Respite	
ABOUT YOU			
Title:	First Name:	Surname:	
Preferred Name:		Date of Birth:	
I identify as: ☐ Female ☐ Male ☐ Non-binary ☐ Prefer not to say			
Marital Status: ☐ Married ☐ Single ☐ Widowed ☐ Divorced ☐ De Facto ☐ Life partner			
Do you identify as First Nations or Torres Strait Islander: ☐ Yes ☐ No			
Preferred Language:	Birth Country:	Religion:	
Home Address:			
Suburb:	State:	Postcode:	
Home Phone:		Mobile:	
Email Address:			
Medicare Number: _____		Ref: ____	Exp Date: ____ / ____
MY AGED CARE REFERENCE CODES			
Permanent (if applicable): ____ - _____		Respite (if applicable): ____ - _____	
YOUR PENSION STATUS			
☐ No Pension (Self-Funded) ☐ Yes, I receive a Full Pension ☐ Yes, I receive a Part Pension ☐ Yes, I receive a DVA Pension ☐ Gold Card ☐ White Card ☐ Other ☐ Yes, I receive Other Centrelink Payment If other, what type of income support do you receive:			
Card/Pension No: _____		Exp Date: ____ / ____	
FIRST CONTACT PERSON - Next of Kin (NOK)			
First Name:		Surname:	
Relationship to applicant:			
Home Address:			
Suburb:	State:	Postcode:	
Home Phone:		Mobile:	
Email Address:			
Have you appointed a General Power of Attorney to make decisions on your behalf? ☐ No ☐ Yes, if so, please provide a copy of the document			
Have you appointed a Financial Power of Attorney to make financial decisions on your behalf? ☐ No ☐ Yes, if so, please provide a copy of the document			

Have you appointed a Medical Treatment Decision Maker to make medical decisions on your behalf? ☐ No ☐ Yes, if so, please provide a copy of the document		
Do you have a Guardian? ☐ No ☐ Yes, if so, please provide a copy of the document		
Do you have an Administrator? ☐ No ☐ Yes, if so, please provide a copy of the document		
SECOND CONTACT PERSON – used if we are unable to contact first contact person		
First Name:		Surname:
Relationship to applicant:		
Home Address:		
Suburb:	State:	Postcode:
Home Phone:		Mobile:
Email Address:		
RESPONSIBILITY FOR PAYING ACCOUNTS & RECEIVING CORRESPONDENCE		
Who would you like to be the primary recipient of all correspondence from Rose Lodge, including billing, after accepting a room? ☐ Myself ☐ First Contact ☐ Second Contact ☐ State Trustees/Administrator		
Would you like to receive your own mailing? ☐ Yes ☐ No, I would like my first contact person to receive my mail		
Do you consent to your relevant health information being uploaded to your My Health Record? ☐ Yes ☐ No		
MEDICAL & HEALTH PROFESSIONAL CONTACT		
General Practitioner:		
Name of Clinic:		
Address:		
Suburb:	State:	Postcode:
Phone Number:		Fax Number:
Email Address:		
MEDICATION CHART		
A completed Medication Chart and Webster Pack is required 1 week prior to admission Has a Medication Chart been completed? ☐ Yes ☐ No Has a Webster Pack been provided? ☐ Yes ☐ No		
PLEASE SIGN the AUTHORISATION		
NAME		SIGNATURE & DATE

