

Full Name: ...	DoB: ...	Gender: ...
Address: ...		Postcode: ...
Telephone: ....		Unpaid carer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Rented (Council) <input type="checkbox"/> Rented (Private) <input type="checkbox"/> Housing Association <input type="checkbox"/> Owned <input type="checkbox"/>		*Ethnicity: ...
GP Surgery: ....		NHS Number: ....

## What do you need support with?

<h3>Health</h3> <p>Falls Prevention Exercises <input type="checkbox"/></p> <p>Stress, Anxiety or Low Mood <input type="checkbox"/></p> <p>Healthwatch Southwark <input type="checkbox"/></p> <p>Unintentional Weight Loss <input type="checkbox"/></p> <p>Alcohol or Substance Misuse <input type="checkbox"/></p> <h3>Money</h3> <p>Benefit Queries <input type="checkbox"/></p> <p>Trouble Paying Bills <input type="checkbox"/></p> <p>Paying for Care <input type="checkbox"/></p> <p>Filling in forms <input type="checkbox"/></p>	<h3>Social</h3> <p>Groups &amp; Activities <input type="checkbox"/></p> <p>Exercise Classes <input type="checkbox"/></p> <p>Volunteering <input type="checkbox"/></p> <p>Befriending <input type="checkbox"/></p> <p>Technology Skills <input type="checkbox"/></p> <p>Accessing Transport <input type="checkbox"/></p> <h3>Care &amp; Support</h3> <p>Unpaid care responsibilities <input type="checkbox"/></p> <p>Support with a Dementia Diagnosis <input type="checkbox"/></p> <p>Visual Impairment <input type="checkbox"/></p> <p>Food Delivery <input type="checkbox"/></p>	<h3>Housing</h3> <p>Home adaptations and equipment <input type="checkbox"/></p> <p>Pendant Alarm <input type="checkbox"/></p> <p>Monitored Sensors or Reminders <input type="checkbox"/></p> <p>Housing issues <input type="checkbox"/></p> <p>Handyperson <input type="checkbox"/></p> <h3>Safety</h3> <p>Home Security <input type="checkbox"/></p> <p>Home Fire Safety Check <input type="checkbox"/></p> <p>Victim of Scams <input type="checkbox"/></p>
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<b>Additional information (e.g. Significant health condition, known risks, known to any other services etc.):</b>	
...	
<b>Referrer Name:</b> ...	<b>Referrer Organisation:</b> ...
<b>Date of Referral:</b> ...	<b>Referrer Tel/Email:</b> ...
<b>IMPORTANT: please tick this box to confirm the below statement has been read to and agreed by the client</b> <input type="checkbox"/>	
By signing and / or ticking this form, you consent to the information on it being stored and shared by Ageing Well Southwark. Ageing Well Southwark is a partnership between Age UK Lewisham and Southwark, Blackfriars Settlement, Link Age Southwark, Southwark Carers, Southwark Pensioners' Centre and Time and Talents. We will call you to discuss the information on this form and any onward referrals	
<b>Client signature:</b> ...	
<b>Client consent</b> <input type="checkbox"/>	
<b>Tick this box if you also consent for your personal information to be shared with the London Borough of Southwark's Customer Service Team (who are working with the Ageing Well Southwark partners to deliver the service)</b> <input type="checkbox"/>	

## What is S.A.I.L.?

**S.A.I.L.** is the name of **Ageing Well Southwark's** quick-referral service. The project helps older people over the age of **60** living in Southwark, and those supporting them, to access a wide range of services to support **Safe and Independent Living**. The project consists of a simple checklist of subjects linked to services available in the borough. Anyone can make a referral and people can self-refer. S.A.I.L. is not an emergency service so should not be used for any urgent issues. It can take up to ten working days for Facilitator to get in touch with the person referred, and then an average of four to six weeks for partner agencies to make contact.

## How do I refer?

Simply tick the appropriate options on the **S.A.I.L. checklist** and return it to **Ageing Well Southwark**, who coordinate the response from **S.A.I.L. partners**. You can send completed checklists via:

**Email:** sail@nhs.net OR sail@ageuklands.org.uk

**Fax:** 0207 378 9217

**Post:** SAIL Team, Southwark Resource Centre, 10 Bradenham Cl, Walworth, London SE17 2QB

**Phone:** Checklists can be completed over the phone with a Facilitator by calling 0207 358 4077.

**Web form:** [www.ageingwellsouthwark.org](http://www.ageingwellsouthwark.org)

## Drop-in and form-filling support

You can also access SAIL support at one of our partner locations:

- Time and Talents
- Blackfriars Settlement
- Southwark Pensioners Centre
- Southwark Carers
- Link Age Southwark
- Yalding Health Living and Learning Centre
- Stones End Day Centre