



Referrer Details

Self Referral Yes No (if no please complete referring service details)

Referring service:

Referrer name and job title

Referrer contact details Email

Phone

Language spoken: Interpreter required? Yes No

Carer attending Yes No

Preferred venue _____ (please see Falls Class Timetable for current venues)

I agree and consent to:

- A referral and commitment to 20 week programme Falls Prevention Programme
- My GP or referrer being contacted if needed to confirm medical history
- Taking part in the LLGA session at my own risk and that the leaders cannot be held responsible for any accidents/injuries which might occur within hazards stated in the risk assessment.
- To be included in any photography/videos taken throughout the sessions and understand they may be used for promotional material throughout social media and websites.
- Share my personal information for the purposes of participating in the Falls Prevention Programme and for evaluation between Leeds City Council and academic partners. The service will be externally evaluated and your information will be shared for this purpose only with the NHS and our research partners North of England Commissioning Support Unit (NECs) and Leeds Intelligence Hub which is hosted by the Leeds Clinical Commissioning Group's.
- Your personal information will be shared with Leeds City Council, Adults and Health Department for evaluation and Telecare Talk for the purposes of ongoing support. Leeds City Council, Adults and Health Department will share your details with Leeds Beckett's University for evaluation of the Telecare Talk service.
- The Falls Prevention Programme will share information for the purposes of organising transport where appropriate.
 - Leeds City Council, Transportation Service – Transport to and from venues
 - Health for All – Transport to and from venues
 - Age UK – organisation of transport and welcome phone call.

Signature of Client or Referrer: _____ Date of Referral

Any additional Information:

Please return to LLGA Referral Programme, John Charles Centre for Sport, Middleton Grove, Leeds, LS11 5DJ or
Secure email: health.programmes@leeds.gcsx.gov.uk

