



Office use only

Memories+ Group is a private healthcare provider delivering both in-home services as well as an Adult Day Program. Our day program is non-diagnosis specific and all are welcome based on an eligibility assessment. All of our services are privately funded with no referral required.

Service Referral form

___ Home Healthcare ___ Adult Day Program

Steps to make a Memories+ referral:

1. Discuss with your client / patient and get permission to share their information
2. Complete form and either e-mail or fax to Memories+ Group

E-mail: info@memoriesplusgroup.com, Fax: 905-898-4320

Date of Application: _____ Referred by: _____

Organization: _____ Contact Info: _____

CLIENT / PATIENT INFORMATION

Name: _____ M / F DOB: _____

Address: _____

Primary medical concern: _____

Allergies: Y / N Details: _____

Fall risk: Y / N Details: _____

Assistance required with transfers: Y / N Details: _____

Mobility aids used: Y / N Details: Wheelchair ___ Walker ___ Cane ___

Toileting: Independent ___ Assistance required ___

Incontinence: Y / N Details: Bladder ___ Bowel ___ Occasional ___ Total ___

Identified behaviors:

Agitation: ___ Anxiety: ___ Confusion: ___ Depression: ___ Physically abusive: ___

Verbally abusive: ___ Sexually inappropriate: ___ Exit seeking: ___ Other: _____

Dietary restrictions/ Swallowing issues: Y / N Details: _____

Medication reminders required: Y / N Details: _____

Additional information: _____

CONTACT: Name: _____ Relationship: _____

Contact Info _____ Best time to call: AM / PM _____

Terms and Conditions:

1. A free nursing assessment by Memories+ is required for all of our services
2. Program eligibility is determined based on Memories+ nursing assessment and program availability.