

Date completed:

RESIDENTIAL AGED CARE HOME (RACH)

ORIENTATION INFORMATION FOR GENERAL PRACTITIONERS

RACH	H name:	
RACH	H address:	
F	Front door code: Other access options:	
CONTACT BUSINESS HOURS	RACH secondary contact name:	Position: Mobile phone: Position: Mobile phone:
CONTACT AFTERHOURS	Outside business hours: Dementia care unit (if applicable):	
BED	Total RACH resident capacity: Considerations: Considerations: Considerations: Considerations: Considerations:	
SOFTWARE SYSTEMS & TELEHEALTH	Note: GPs (incl. GP registrars) may need to have own log in. PORMC: Note: GPs may need to 'delegate' their GP registrars to use this software.	Data

VACCINE FRIDGE	Available (Available on-site: Yes No										
	Locati	on:]C	Not c	onnect	:ed
	Authoris Nu Immunise	rse								nurse	uthoris immu able on	nisers
KE	Y CO	NT	ACT	S								
vis ar	Current siting GPs nd contact details:											
Distric	cal Health ct Geriatric ng Squad:											
	CESPHN:											
RA	CH FI	-0	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							
RA	CH FI	LO	OR F	PLAI	N							

