**Advanced Dementia Support Team Request for Consultancy**  
*(Please see the ADST Consultancy leaflet for information about our support)*

|  |  |
| --- | --- |
| **Reason for your request ~ please add additional information to help us understand your need** | |
| . | **Advice & Guidance** |
| . | **Request for bespoke training / education (please add information)** |
| Any additional information here | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Professionals details: Tell us about you ~ please complete all sections** | | | |
| Name |  | Contact Telephone |  |
| Job Title |  | Organisation address | Your address |
| Contact Email |  | | |

|  |  |  |
| --- | --- | --- |
| **Who are you making this request for? ~ please complete all sections** | | |
| Name: Person with Dementia |  | **Name of Carer** |
| Person with Dementia  Date of Birth |  |
| Diagnosis |  | **Contact details ~** Telephone / email |
| On Palliative Care Register | \*YES \*NO |
| EPaCC in place | \*YES \*NO | **Address** |
| Life expectancy < 12m | \*YES \*NO |

|  |  |
| --- | --- |
| **ADST Criteria must be met for a consultancy request regarding a person with dementia ~ Please Tick All That Apply** | |
| . | Person has a diagnosis of dementia |
| . | Person requires 24/7 supervision |
| .  . | EITHER: Consent *has been gained* from the person you request consultancy for  OR: request is made in the person’s best interests because consent is *not obtained* due to lack of capacity |
| . | As the Professional you accept clinical responsibility |

### Clinical Responsibility

ADST support the professional involved. It is the professionals responsibility to carry forward any guidance. ADST do not direct or control care or treatment for patients or residents. The professional requesting consultancy support holds clinical responsibility.

**Information Governance and Consent**ADST complies with Caldicott Principles and GDPR requirements when access to, and recording of personal identifiable information is required. For further information on how we utilise or retain your information please refer to our [website](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Feolp.co.uk%2Fprivacy-policy%2F&data=04%7C01%7CJenny.Casson%40eolp.org.uk%7C0812c734c7a647df174108d9b992cd89%7C22a817dbf95047e3b3d30395a2011240%7C0%7C0%7C637744862427872666%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=9QIqqx%2FtnPohZ0QdLC3SSy%2BrX2J8hi0F6KO7C2pX3KE%3D&reserved=0) (<https://eolp.co.uk/>) or email us at [Info@eolp.org.uk](mailto:Info@eolp.org.uk)

**Please email this completed Consultancy Request form to** [**eolp.adst@nhs.net**](mailto:eolp.adst@nhs.net)**ADST will aim to respond to your request within 5 working days. Date of consultancy request is treated as the date the form is received to the EOLP email account. Our working hours are 8:30am to 4:30pm Monday to Friday. We do not work bank holidays or weekends. We are not a crisis or urgent referral team.**