



## Provincial Family Caregiver Program Caregiver Referral & Consent Form

Please complete form and fax to 1-250-361-2660 or call us at 1-877-520-3267 toll free within B.C. or email [cgsupport@familycaregiversbc.ca](mailto:cgsupport@familycaregiversbc.ca). We will follow up with the family caregiver within 2 business days.

Date of Referral: \_\_\_\_\_

Name of Caregiver: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Best time to contact the caregiver:  AM  PM

Referral made by: \_\_\_\_\_

Self  Family  Practice  Community Agency: \_\_\_\_\_

VIHA  VCHA  FHA  IHA  NHA Title: \_\_\_\_\_

City/Community: \_\_\_\_\_

Other: \_\_\_\_\_

### Caregiver Consent\* (Consent Required. Without consent we are unable to contact the caregiver.)

I consent to be contacted by the Family Caregivers of BC about their Provincial Family Caregiver Program.

Verbal consent received Date: \_\_\_\_\_

Caregiver Signature: \_\_\_\_\_

City/Community: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Provincial Family Caregivers of BC Program supports family caregivers in partnership with the Ministry of Health, Patients as Partners Initiative and offers:

- A Toll-Free Caregiver Support Line accessible anywhere B.C.
  - 1:1 Caregiver Coaching Sessions
  - Caregiver Support Groups
  - Webinars and workshops
  - Online Caregiver Resource Centre
- [www.familycaregiversbc.ca](http://www.familycaregiversbc.ca)