

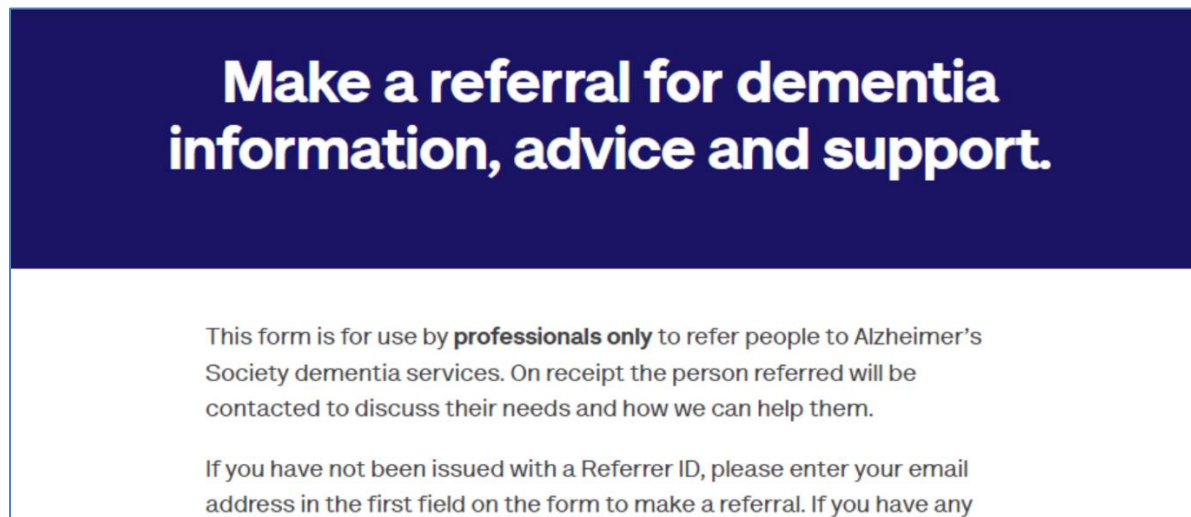
Online Referral System Guide

Through these simple steps we will show you how you can quickly and easily refer a person into our Dementia information, advice, and support services.

Step 1: Open the online referral form.

You can find the online referral form at <https://www.alzheimers.org.uk/referralform>. Alternatively, you can Google 'Alzheimer's Society Make a referral.'

This will bring you to the referral form homepage, as shown below.

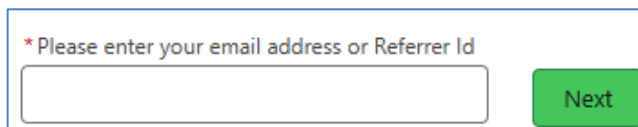


**Make a referral for dementia
information, advice and support.**

This form is for use by **professionals only** to refer people to Alzheimer's Society dementia services. On receipt the person referred will be contacted to discuss their needs and how we can help them.

If you have not been issued with a Referrer ID, please enter your email address in the first field on the form to make a referral. If you have any

Scroll down the page to see the first field, enter your email address or Referrer ID then click Next or enter.

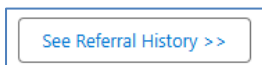


* Please enter your email address or Referrer Id

If you have previously referred into local Alzheimer's Society services, you may have been issued with a Referrer ID for example ALZ-09090. If not, or you prefer to use your work email address, you can register yourself with an email address when you are ready to make a referral.

The first time you enter your email address, you will be asked to complete further details at the bottom on the referral form, 'ABOUT YOU (THE REFERRER)', after you have entered the details of the person who needs support.

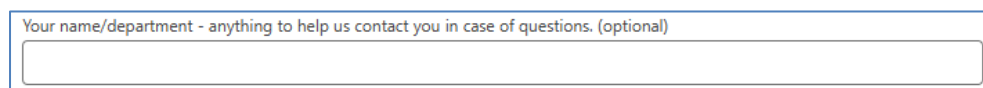
The next section of the referral form will now open:



[See Referral History >>](#)

This is explained below in the [your questions answered](#) section.

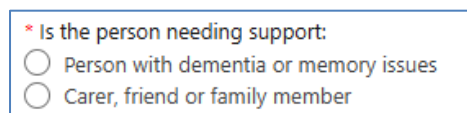
Where you have entered a Referrer ID, please enter your name and contact information in this field.



Your name/department - anything to help us contact you in case of questions. (optional)

Step 2: Provide information about the person needing support.

What type of person requires support.



* Is the person needing support:

☐ Person with dementia or memory issues

☐ Carer, friend or family member

Select 'Person with Dementia or memory issues, where the person needing support has memory issues either with or without a formal dementia diagnosis. Select Carer, friend or family member where the person needing support is a carer or other person related to a person with memory issues.

Most of field labels make it clear what needs to be entered, and where an * is shown the field must be completed. Extra information is given below where appropriate.

THE PERSON NEEDING SUPPORT		ADDRESS OF THE PERSON NEEDING SUPPORT	
* First name		Find Address ⓘ Search address or postcode...	
* Last name		* Street Address 	
Date of birth	Gender	* City/Town	County
	Select a gender ▼		
Language (optional)		* Postcode	* Country
Select an Opt... ▼			

You **MUST** provide an address for the person needing support, without one the referral cannot be processed.

Although you can manually type in the address, using the Find Address Search field ensures that the postcode is valid. A valid postcode also ensures that your referral is directed to the correct team.

If you selected 'Person with dementia or memory issues', you will now be asked if you know whether they have a formal diagnosis of dementia or MCI. Select "Yes" if you know the formal diagnosis.

MEMORY DIAGNOSIS OF PERSON NEEDING SUPPORT

* Do you know if the person has a diagnosis of dementia or MCI?

☐ Yes

☐ No

If you select "Yes" you will be asked to provide the diagnosis information.

* Diagnosis of dementia	* Date of diagnosis
Select a diagnosis ▼	
Diagnosis details	☐ Date is approximate

The next section asks about support needs and service delivery risks.

SUPPORT NEEDS AND SERVICE DELIVERY RISKS

Primary reason for support ⓘ

Select an Option ▼

Further information about the person needing support and their support needs ⓘ

Characters Remaining: 1000

The Primary reason for support is a pick list, from which you should select the most appropriate option.

Further information about their support needs can be entered in the field below.

The further information field can also be used to record any information which you have been advised is needed by your local Alzheimer's Society team.

Are you aware of any risks/hazards our employees/volunteers may face when delivering services to the person requiring support?

☒ Known risks
☐ No known risks

Please give details 

Select Known risks or No known risks as appropriate. If 'Known risks' is selected, please give details in the field below.

Known risks could be related to the person needing support (e.g. history of threatening or abusive behaviour), their home (e.g. Animals/Pets) or home location (e.g. lack of street lighting/parking).

Finally, how should we contact the person needing support?

HOW SHOULD WE CONTACT THE PERSON NEEDING SUPPORT

☐ Contact the person who needs support directly
☐ The person needing support prefers contact to be made via someone else

Select the appropriate option.

If we need to contact the person needing support directly, the next section will ask for their preferred method of contact and contact details.

* Preferred method of contact Select an Option ▼ Email Phone call Post	Email address Phone number (no spaces) Other phone number (no spaces)
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If the person needing support wishes us to contact a friend or family member to support them to access our services, you will then be asked for details about the person they wish us to contact initially and their contact details, this person is known as the Designated Contact. A Designated Contact MUST be contactable by phone or email.

By completing this section of the form you are confirming that the person needing support has given their consent for communication with the Alzheimer's Society to be conducted through the designated contact named below. Please include postcode or date of birth for unique identification.

* First name * Last name	Postcode Date of birth
Language (optional) Select an Option ▼	
* This person is the .. Select a relationship ▼ ...of the person needing support	

NOTE: Wherever possible please provide either the Postcode or Date of birth of the Designated Contact.

Provide the Designated Contacts contact details.

* Preferred method of contact Select an Option ▼ Email Phone call	Email address
	Phone number (no spaces)
	Other phone number (no spaces)

Step 3: Provide information about you (the referrer)

If you are registering to use your email address for the first time, we need to collect some information about you, the referrer.

When completing these fields, it is essential that you do not use abbreviations used locally, the Alzheimer's Society team processing initial registrations may not be based in your geographic area and may not be aware of local abbreviations.

ABOUT YOU (THE REFERRER)					
* First name	* Organisation type Select an Option ▼				
* Last name	* Company				
* Job title	Find Address ⓘ Search address or postcode...				
* Email address	* Street Address				
* Phone number (no spaces)	<table border="1"><tr><td> * City/Town </td><td> County </td></tr><tr><td> * Postcode </td><td> * Country </td></tr></table>	* City/Town	County	* Postcode	* Country
* City/Town	County				
* Postcode	* Country				

The email address to be registered needs to be personal to you, not a team or group email address and it also needs to match the email address entered in the first field of the form.

You should select the organisation type you are employed by.

If you work for a GP practice, Primary Care Networks etc providing NHS services, select 'Other'.

If you select either of the first two options above, you will be asked for the full name of the Trust/Health Board/Local Authority and the name of your service or department.

The screenshot shows a form section for 'Organisation type'. It features a dropdown menu with the text 'Select an Option' and a downward arrow. Below the dropdown, three options are listed: 'NHS Trust/Health Board', 'Local Authority', and 'Other'. Below this list, there is a dark blue header bar with the text 'Please enter the full name of the NHS Trust or Local Authority'. Underneath this bar, there are two text input fields. The first is labeled '* Local Authority / Trust' and the second is labeled '* Service or Department'.

Step 4: Submitting the referral.

IMPORTANT: Before submitting your referral, it is highly recommended that you check through the completed form. We have had examples where the name, address and contact fields for the person needing support or their designated contact have been overwritten by those of the referrer due to autofill being enabled within Microsoft Edge or Google Chrome.

The last step is to confirm that the person needing support is aware of the referral being made and has agreed to us contacting them or their designated contact to discuss how we can help.

The screenshot shows a section titled 'CONFIRM CONSENT'. It contains the text 'All information submitted will be entered onto Alzheimer's Society systems and held securely.' Below this, there is a checkbox with the text '* Please confirm the person needing support has been informed that their data will be passed to the Alzheimer's Society in order for contact to be made regarding possible help and support that can be offered and that you have a record of their consent.' At the bottom of this section is a blue 'Submit' button.

Tick the box and click on 'Submit'.

Occasionally you may see an error message appear under the "Submit" button, this usually means a required field on the form has not been completed, please re-check the form.

Once you have submitted the form, you should immediately see an onscreen submission confirmation, as below.

NOTE: If the screen appears to be blank, you may need to scroll up the page to find it.

The screenshot shows a confirmation screen with the text 'Thank you for submitting a referral to the Alzheimer's Society.' Below this, it says 'Your Reference is : REF-190642'. Further down, it states 'We will now process the referral and contact the person referred as soon as possible. Please note we may contact you if we need clarification on any of the details that you have entered onto the referral form.' At the bottom is a blue button labeled 'Make another referral'.

This confirms your referral has been received and provides you with a referral reference number, you should note this for your own records.

You can immediately proceed to make another referral.

Your questions answered.

The form is not displaying on the webpage.

To use the Online Referral Portal, you need to be using an up-to-date browser such as Microsoft Edge, Chrome, or Safari. Another reason may be that the form is being blocked by your organisation's Firewall, in this case, please speak to your IT lead/department, who are able to resolve this.

Some fields on the form are auto-populating with my personal information.

This occurs when you have autofill enabled in your browser settings. How to disable autofill is dependent on the browser you are using, instructions to disable can be found on the internet for most browsers. Search "Disable autofill" followed by the name of your browser.

How do I know my referral has been correctly submitted?

When you click on submit at the bottom of the referral screen, you will either see an error message below the Submit button or see the submission confirmation as above.

How do I know my referral has been processed?

The online referrer portal now includes a facility to view all referrals submitted by a referrer. This will enable you to check that referrals you have submitted have been successfully received and processed by the Society.

After entering a valid referrer id or registered email address, the referrer will see a button "See Referral History."

ABOUT THE REFERRAL

*Your email address or Referrer Id

ALZ-00000

[See Referral History >>](#)

The referral form does not use authentication, so it is not possible to display any information that might identify the person referred. The only data shown on the history page is the referral reference number, the date, the status of the referral, if declined, the reason and the source.

<< Back to form

 Referral History

The table below shows referrals submitted by your organisation.

Search

Column

Q

Name

showing 10 of 19 rows

[Load More](#)

	Name ↑	Date	Status	Declined Reason	Source
1	REF-253077	Tue, 12 Sept 2023, 10:48	Accepted		Submitted to the portal
2	REF-253076	Tue, 12 Sept 2023, 10:41	Accepted		Telephone or paper
3	REF-253075	Tue, 12 Sept 2023, 10:41	Accepted		Telephone or paper
4	REF-253074	Tue, 12 Sept 2023, 10:41	Accepted		Telephone or paper
5	REF-253073	Tue, 12 Sept 2023, 10:41	Accepted		Telephone or paper

The list shows referrals submitted by the whole referrer organisation if you enter a Referrer Code. If the Referrer is using a work email as their referrer ID, the list will indicate referrals submitted using that email address ("submitted to the portal by you"). Referrals that were not submitted using the portal and manually recorded by our internal staff show as "Telephone or paper."

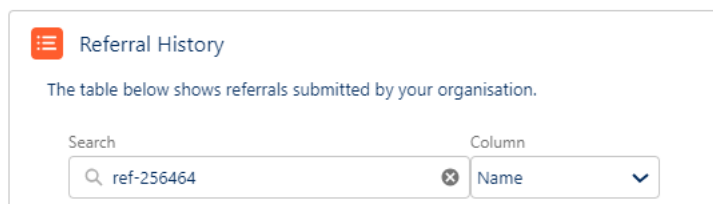
"Received" means the referral has been received and is waiting in the referral queue for processing.

"Accepted" means the referral has been processed and we are in the process of offering or delivering the service to the person referred.

"Declined" means the referral has been declined for the reason given.

- Not Dementia related – in this case you will have been contacted to explain the reason.
- Referral withdrawn – because you withdrew the referral before processing.
- Duplicate Entry Error – two or more referrals were submitted for the same person at the same time and were exact matches.

You are also now able to search for a referral by entering the reference number in the Search field.



The screenshot shows a web interface titled "Referral History" with a red icon. Below the title, it says "The table below shows referrals submitted by your organisation." There are two search fields: "Search" and "Column". The "Search" field contains the text "ref-256464" and has a magnifying glass icon. The "Column" field contains the text "Name" and has a dropdown arrow icon.

Further Information

If you require any additional information or support about how to make a referral, or if you would like to ask any questions about this referral form, please contact us on 0330 1503456 or speak to your local Alzheimer's Society service team.