

E3 Supports BEFORE your injury

Worker name

Claim number

Planning facilitator

Contact no:

Formal supports

Before your injury, did you have any paid domestic support or someone who was paid to do a job for you or help you? If so, what type of support?

(e.g. gardener, cleaner, babysitter, home handy person)

Informal supports

Did you have support from a person who did a task for you but you did not pay? If so, what type of support?

(e.g. your mother did the babysitting, your neighbour collected your mail and dropped it at your door, you travelled to work in a friend's or colleague's car, your adult daughter took you to do the grocery shopping, you shared transport to sport with other parents of children in your child's football team)

Is there any other personal information that you would like to tell us which we need to be aware of, that may affect your support needs or preferences? If so, please specify.

(e.g. your faith or religious affiliations means you follow a particular diet and so anyone cooking a meal for you needs to be able to cook that way, or your cultural identity means you would only like a support person of a particular gender)

What is the most important thing to you at the moment?

What are your main concerns right now?

Other relevant information