

Telephone call log sheet

Date:

Time: am pm

Entered in database: Yes No

Caller: Male Female

Calling about

- Queensland Stay On Your Feet® Will you stay active and independent? checklist
- Queensland Stay On Your Feet® Checklist
- Queensland Stay On Your Feet® Community Good Practice Guidelines
- Queensland Stay On Your Feet® Community Good Practice Toolkit
- Queensland Stay On Your Feet® website
- Green Box: Best practice guidelines for hospitals and residential aged care facilities
- Risk screening (*please specify*)
- Risk assessment (*please specify*)

Risk factors

- | | | |
|-------------------------------------|--|--|
| <input type="radio"/> Inactivity | <input type="radio"/> Balance | <input type="radio"/> Gait |
| <input type="radio"/> Vision | <input type="radio"/> Mobility | <input type="radio"/> Medication |
| <input type="radio"/> Foot problems | <input type="radio"/> Shoes | <input type="radio"/> Hazards in public places |
| <input type="radio"/> Home hazards | <input type="radio"/> Medical conditions | |

Interventions

- | | | |
|---------------------------------------|---|--|
| <input type="radio"/> Tai Chi | <input type="radio"/> Education session | <input type="radio"/> Exercise classes |
| <input type="radio"/> Health services | <input type="radio"/> Grants | <input type="radio"/> Other (<i>please describe</i>) |
-
-

Other request

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How found out about project/program

- | | | |
|---|----------------------------------|---|
| <input type="radio"/> Newspaper article | <input type="radio"/> Newsletter | <input type="radio"/> Referral (<i>from whom</i>) |
| <input type="radio"/> Word of mouth | <input type="radio"/> Flyer | |
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Citation: Queensland Health. 2007. *Queensland Stay On Your Feet® Community Good Practice Toolkit – Phase 4 materials: telephone call log sheet*. Health Promotion Unit, Population Health Branch, Division of the Chief Health Officer, Queensland Health, Brisbane.