Order Form

Care Aims Quick Reference Cards and Posters

Name: Job Title:	
Organisation:	
Delivery Address:	Postcode:
Tel: ORDER NUMBER(if a	vailable):
Please note: All prices are inclusive of P&P	
1. A5 LAMINATED QUICK REFERENCE CARDS (DEFINITIONS AND FLOWCHART)	
Individual cards@£1.25 each	WHAT IS MY DUTY OF CARE TO REFERRED PEOPLE? SIGNPOST TO UNIVERSAL 8. TARCETED NO At this point, do I think I can help this service user
sets of 20 cards@£24.00 per pack	manage a risk that they or other anomal manage themselves. It is this service user. It is this service user. It whe end if its. YES
sets of 50 cards@£55.00 per pack	currently borny harmed presenting particular, condition or statution? VES State service users' functional impact unstable or director director and likely to have helped only to maintain during the rate of officeronal project unstable or differentiating of the rate of officeronal project unstable or differentiating of the rate of differentiation of the rate of differe
sets of 100 cards@£100.00 per pack	By the end of this epicode, is this service user likely to be actively participating more in their daily life (i.e., doing more of that they warkfueed to) as a result of my intervention? NO
Please CALL us for costs of 200 or more cards	Could changing this service user's condition, skills of wells or problems in the the problems in the the full response of the problems of the
2. A3 coated POSTERS (FLOWCHART ONLY – BOTH VERSIONS) (not laminated)	By the end of this episode, am I likely to have helped only increase this survivor is readiness for change or their acceptance of their current disultane/problem/impact? ADJUSTMENT
POSTERS @£5.00 each	By the end of this episode, and I likely to have helped early increase this service user's comfort or reduced their pain? (a) NO (b) Kate Malcomess, June 2009
TOTAL COST OF CARDS & POSTERS:	£
VAT @ 20%:	£
TOTAL COST OF ORDER:	£
Method of Payment:	
Cheque enclosed for full amount (Payable to Kate Malcomess Consultancy Ltd)	
Purchase Order number	_ (or attached)
Please send invoice (if not the address above):	
Postcode:	
Tel: e-mail:	

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