



Palliative Navigation Referral

During extended periods of illness, whether we're sick ourselves or providing care for someone else, it's normal to feel a bit overwhelmed. And it's also during these periods that our support networks can fall away.

The [Palliative Navigator](#) will assist you to see things a little differently, and to mobilize a network so that family, friends, and neighbours can contribute to your support. You can also elect a friend or relative to speak with the Navigator, to help you along this journey.

Experts recommend you to get to know or strengthen these networks as early as possible, so everyone is "willing and able" when the need arises.

We know it's *hard to ask for and accept help*. Not wanting to be a burden, wishes for privacy, and having others think you're not coping; it's normal to think and feel this way.
[Let the Navigator create some opportunities for you!](#)

Your Name: _____ **Closest Town or Village:** _____

Phone: Home: _____ **Cell:** _____ **Text?:** Yes No

Family or Friend I'd like involved: _____

Phone: Home: _____ **Cell:** _____ **Text?:** Yes No

SELF REFERRAL	
_____ Signature	_____ Date
AGENCY REFERRAL	
Name of Referee: _____	Agency: _____
Consent Obtained form person for Referral: Yes No	_____ Date

Email, text, or mail this form to:

Wheatland Hospice Society
P.O. Box 2154
Strathmore, AB T1P 1K2

Phone: 403-934-8199 • **Email:** navigator@wheatlandhospice.ca