



Punjabi Community Health Services

Appendix B – Refusing Consent Form

CLIENT REFUSED TO SIGN THE FOLLOWING FORMS:

In the event that a client refuses to sign any documents the Case Manager must complete this form and get supervisor’s signature. Form must be placed in client file.

1) **Orientation Package**

Date:

Specify: _____

2) **Privacy Notice Form**

Date:

Specify: _____

3) **Consent Form**

Date:

Specify: _____

4) **Application**

Date:

Specify: _____

5) **Care plan**

Date:

Specify: _____

Other:

Date:

Specify: _____

Other:

Date:

Specify: _____

Name:	Name:
Signature of Case Manager:	Signature of Supervisor:
Date:	Date: