

## **Pre-application for a Mobility Dog**

#### **Application Type**

**Mobility Dog** 

#### INTRODUCTION TO MOBILITY DOGS

Thank you for your enquiry to Mobility Dogs.

Mobility Assistance Dogs Trust (Mobility Dogs) is a Charitable Trust established in 2003. Our Mission is to enhance the lives of people living with long-term disabilities, increasing independence, confidence, self-esteem and participation in New Zealand communities. Mobility Dogs agree to treat all clients and applicants equally and aim to ensure that clients feel treated with attention, courtesy and respect. We achieve this through the following initiatives: undertaking the training of Mobility Assistance Dogs; providing Mobility Dogs to people living with disabilities and instructing them in the skills required to work with a Mobility Dog.

#### THE SPECIALIST TASKS OF A MOBILITY DOG

Our everyday work is focused on partnering highly skilled Mobility Dogs with individuals living with disabilities including, but not exclusive to, cerebral palsy, multiple sclerosis, muscular dystrophy, spinal injury, stroke, and Parkinson's. Mobility Dogs are trained in a range of specialist tasks such as:

- · Retrieving and delivering items
- Paying for purchases across a counter
- · Assisting with taking off clothing ie. socks, jackets, dressing gowns etc
- Opening and closing doors, cupboards and drawers
- Carrying items
- Pressing buttons ie. pedestrian and restroom buttons
- · Depositing items into baskets and containers
- · Barking for help on command
- Delivering items from one person to another

We recommend you go to our website www.mobilitydogs.co.nz as you will gain an overview of the Trust. There are several client stories that will give you a sense of what to expect from being partnered with a Mobility Dog.

#### **ELIGIBILITY CRITERIA**

- Applications for Mobility Dogs will be considered regardless of race, sex, religious preference or sexual orientation
- · Primary disability must be a physical disability
- A dog can enhance daily life by undertaking functional tasks
- To be able to adequately manage and care for a dog and have key support person(s) supporting the placement
- · Home environment is suitable for housing a Mobility Dog

#### COSTS

Whilst the cost to raise and train a Mobility Dog is met by the Trust, there is a placement cost of \$10,000 which contributes to associated placement costs if you receive a dog. Should you be accepted into the program, the Client Coordinator -Applicants can give you the steps to follow to apply for funding. Applicants

who successfully move into stage three of the application process will also incur the cost of a Functional Assessment. Once our dogs are placed with clients all ongoing costs of the dog are met by the client and we recommend you seek Pet Insurance cover. On average the ongoing costs are approximately \$3000 per year.

#### **TIMEFRAMES**

Due to demand for a Mobility Dog and individual client requirements we are unable to provide set timeframes for completion of the application process.

We undertake to:

- Keep applicants informed throughout the application process
- · Respond to any enquiries promptly
- You will be advised of the final outcome by Mobility Dogs when the Mobility Dogs team have reviewed and assessed all your documentation
- If you are successful we then begin a process of looking for a suitable Mobility Dog with the training, skills, personality and physical requirements to match your needs

#### THE PRE-APPLICATION PROCESS

Please note that filling out this form does not guarantee you will be suitable to receive a Mobility Dog. We do not accept applications from people under the age of 18.

Please be aware that at any time and for any reason you can choose to withdraw your application.

The process for receiving a Mobility Dog is divided into three separate stages outlined below. As each stage is completed and reviewed by the Mobility Dogs team, you may be asked to continue to the second and finally the third stage or be advised that your application is not proceeding to the next stage.

We understand that this can be a lengthy process for you, however we aim to ensure that a Mobility Dog is appropriate for your specific situation and will enhance your life.

- All applicants will be considered for a Mobility Dog in accordance with our Equal Opportunities Policy. All applications will be considered regardless of a persons race, sex, religious preference or sexual orientation.
- All applicants will be treated with respect and fairness in accordance with Principal 2 of Mobility Dogs Code of Ethical Conduct

#### **APPLICATION STAGES**

#### Stage 1 - Pre-application Form

Please complete the pre-application form in full and press **Submit** at the end.

Our team generally reviews applications monthly. We may contact you if we need further information.

If your application does not proceed, you will be advised of the outcome.

If you have any questions about the form, please contact the Client Team by phone or email.

#### Stage 2 - Home Visit or Online Meeting

If you progress to Stage 2, we will coordinate a home visit or (depending on your location) an online meeting with our Client Team.

For the home visit, we recommend you invite any support people, friends, family, or carers who would be involved in supporting you with a Mobility Dog.

Having a Mobility Dog in your life can be very rewarding. However, the dogs require a great deal of time, care and attention from you. Sometimes living with a disability means care of a dog can be challenging. It is during this meeting that we can discuss how this will be managed by you or your support people.

The cost of the dog will also be discussed at this stage.

After the visit/meeting, the team will review your application again. You will be contacted by the Client Team to confirm whether you will proceed to Stage 3.

#### **Stage 3 – Functional Assessment**

The Functional Assessment helps confirm whether you are a good candidate for a Mobility Dog and informs the matching process.

Assessments are carried out by a Physiotherapist or Occupational Therapist. Our nominated provider, **Neuro Rehab Results** (Auckland), offers both in-person and Telehealth assessments. If you cannot travel to Auckland, we may arrange for a local provider in your area. We will advise the most suitable option for your circumstances.

The assessment takes about one hour and covers your current physical function, how a Mobility Dog may impact it, and includes some routine functional tests.

Cost: Approximately \$300. You will need to pay the provider directly. If using Neuro Rehab Results, payment is required before confirmation and at least 7 days prior to the appointment. Other providers may have different payment terms, which you must meet.

Once the Functional Assessment is complete, the Mobility Dogs team will review all information gathered throughout the process and advise you of the outcome and any next steps.

If you are successful in your application Mobility Assitance Dogs requires confirmation from our clients that they can adhere to the terms and conditions below:

## **Mobility Assistance Dogs Trust terms and conditions:**

I confirm that I meet the eligibility criteria listed above.

I confirm that I am 18 years of age or older.

I confirm that where I live there is adequate outside space with a grassed area, shelter and shade for a dog. I confirm that a landlords letter of approval will be provided if I live in a rental property.

I confirm that I can put in place a support care plan for the dog to ensure its health and wellbeing. This can be managed by a team of support workers if I am unable to carry to out the tasks, ie: regular exercise, grooming and collection of dog waste.

I understand that my property needs to be fully fenced to a minimum height of 1.5m if I am successful in my application for a Mobility Dog, and this will be done prior to placement.

I understand that a Mobility Dog must be fed a Vet approved diet.

I understand that the Functional Assessment is completed by a therapist outside of the Mobility Dogs organisation. Additionally, I agree to the information obtained in the assessment being shared with Mobility Dogs staff in order to progress to the next steps in the application process.

I understand that the placement cost for a Mobility Dog is \$10,000.

I understand that if my application is successful, an exact timeframe for when I will receive my dog cannot be given by Mobility Assistance Dogs Trust and that in some cases a waitlist system may be in place due to demand.

I understand that the Functional Assessment cost must be met my myself. Payment must be paid in full to the Functional Assessment provider before the assessment takes place.

I have disclosed all my pre-existing medical conditions to the best of my knowledge.

I am aware I can withdraw my application at any time and for any reason I choose.

I understand I am not required to undertake any fundraising or public relations activities on behalf of Mobility Dogs unless I agree to this in advance.

If you are unable to meet any of the above requirements please contact the Client Coordinator Team - clients@mobilitydogs.co.nz to discuss this further.

I confirm I have read and understood the above. \*

First Name Last Name

# **Personal Information**

# Application Type \*

**Mobility Dog** 

# Are you a New or Existing Client \*

I am a New Client

I am an Existing Client applying for a Succession Dog

If you are an existing client applying for a Succession Dog, thank you for your new application to Mobility

Dogs We know you have been working with your dog for a long time now and it's not an easy transition when

Dogs. We know you have been working with your dog for a long time now and it's not an easy transition when
you recognise it's time for them to retire. We will help you through this process to make it as easy for you and
your dog as we can. We need to ensure we have all your details correct and any changes to your
circumstances or requirements are recorded so please complete the application form again in full making
sure to complete any additional questions specific to a Succession Dog application.
Title
Mus
Mrs
Miss

## **Full Name**

Ms Other

### **Email**

example@example.com

### **Date of Birth**

Day Month Year

## **Address**

### **Mobile Number**

#### **Alternative Phone Number**

Area Code

Phone Number

### Preferred method of communication

Email

Phone

Mail

### **Emergency contact person's name**

## **Emergency contact person's phone number**

Area Code

Phone Number

# **Emergency contact person's email**

example@example.com

# What is your ethnicity?

Maori

Pacific Peoples

Asian

Middle Eastern/Latin American/African

NZ European/Pakeha

European other

Other

# **Medical Information**

Please provide as much detail as possible.

# Diagnosis:

Onset (When did the condition get diagnosed)
Medications - please list:
List any significant operations you have had in the last 5 years.
List any planned operations in the next 2 years.
Do you have a hearing impairment?  Yes  No  If YES, please provide more detail.

Do you have a vision impairment?
Yes
No
If YES, please provide more detail.
Height:
Weight:
Weight.
List any regular medical appointments and note how often you attend.
List any regular therapy sessions and note how often you attend.
Existing clients applying for a Succession Dog to complete:
List any planned energtions in the payt 2 years
List any planned operations in the next 2 years.

List any regular medical appointments and note how often you attend.
List any regular therapy sessions and note how often you attend.
Are there any significant changes to your health since your last application that we should be aware of including new medications, equipment, changes to vision, speech and hearing:
What is your current employment or tertiary education status if applicable:
How does a typical day look for you, what has changed, and how can we best help you?

Are there any behaviours your current/past dog has displayed you like	or dislike?
Please can you list the names, ages and relationships of anyone else re	esiding in your household:
Please list the ages and breed of any pets that live in your household:	
Please list below all tasks that your current/past mobility dog performs there are any new tasks you would like a new dog to perform:	s for you and indicate if
Care and Maintenance of a Mobility Dog (Please tick the boxes that be	st suit your situation) *
Me Paid Support/Carer	Family/Friends
The dog will be fed by	

The dog will be groomed by

The dog will be exercised by

The dog waste will be picked up by

#### **An Important Consideration**

If it is not possible for your current dog to remain with you when you are matched with a succession dog we need to think about who would care for your dog in its retirement. There are several options we can talk through with you, for example: staying in your home or being re-homed with a friend or family member are the most common. Please make contact with your Client Coordinator to discuss your situation and support you with a plan moving forward.

## Do you need to discuss rehoming your current dog with one of the Mobility Dog team?

Yes

No

Maybe

## **Abilities and Limitations**

## Please indicate below what is most appropriate for you when performing these tasks:

With ease With difficulty Never

Pick up items off the floor

Pick up items off a table

**Open doors** 

**Open drawers/cupboards** 

Push my manual chair

Take off shoes/socks

Take off jacket

Write with a pen

#### My voice is: \*

Loud

Average

Soft

Very soft

Do you have any difficulties with your speech? \*

Do you require any help with transfers (i.e. from wl detail. *	neelchair to bed,	wheelchair to show	er)? Please
Please indicate if you use any of the below:			
, ,	Frequently	Occasionally	Never
Power chair			
Manual wheel chair (self propelling)			
Walker			
Walking stick			
Crutches			
Other			
If you have stated you use a powerchair as a mobil chair the controller is? *  Right	ity aid, please ca	n you state which s	ide of the
Left Not applicable			
Not applicable			
Any other comments?			

# Lifestyle

To better understand what kind of dog would fit into your lifestyle, please describe in as much
detail as possible what a typical week day looks like for you. Please include information such as
what time you get up, any activities you do, any study/work, exercise routines, medical
appointments, social activities, outings, etc, and describe any additional interests and hobbies. $^{\star}$

What are the main tasks you would like a Mobility Dog to assist you with? \*

# Travel away from home - what transportation do you use (multichoice)

Drive own car/Mobility Van

Taxi/Uber Companion Driving Service

Train Bus Friend/Family Drives me

Work

**Grocery Shopping** 

**Day Trips** 

**Extended Trips** 

**Shopping Mall** 

**Visiting** 

Family/Friends

Other

# **Home Environment**

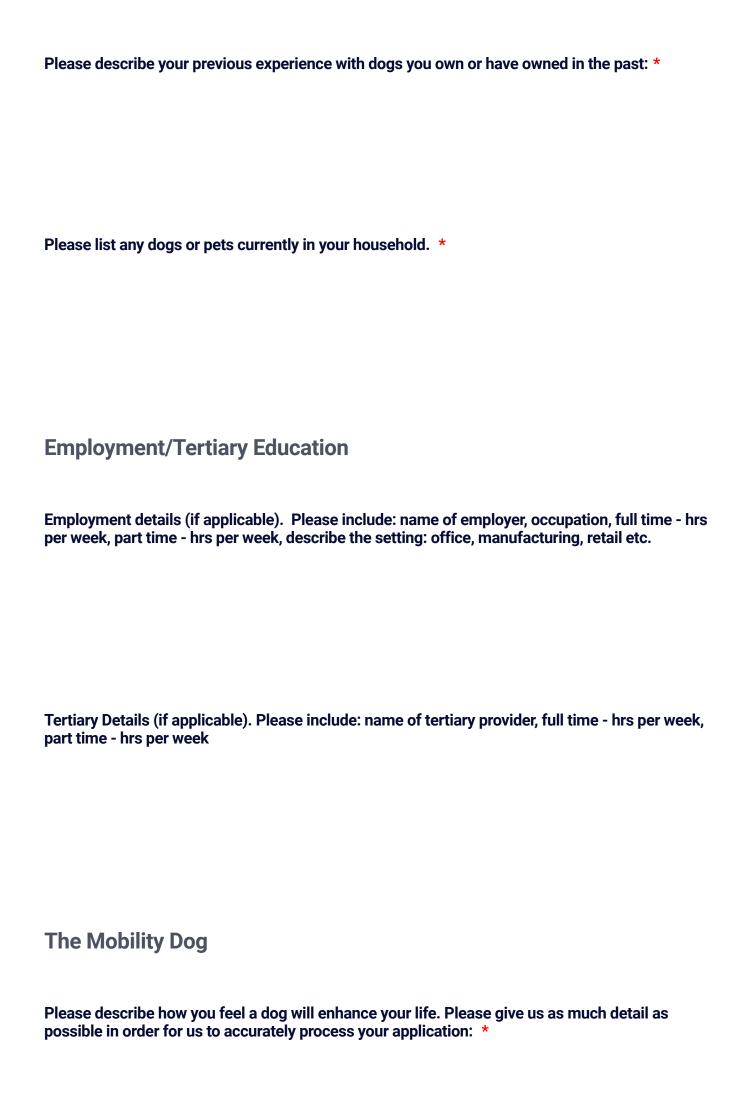
# Do you own your own home? \*

Yes

No

Other

List names, ages and relationship to you of others in your household. *
Are all members of the household supportive of your application? *
Yes
No
If not, please describe their concerns.
Please indicate where you live: *
House Apartment
Townhouse
Other
other
Is the property fully fenced? *
Yes No
140
If NO: Please confirm that if your application is successful you will be required to have a fully fenced property. Fence should be a minimum of 1.5m high.
I confirm I understand the fencing requirements.
If Yes: What is the height of the lowest fence surrounding your property. *
Your Experience With Dogs



Care and Maintenance of	f a	Mobility Dog	(F	Please tic	k the	hoxes	that	hest	Suit	vour	situat	ion)	*
care and maintenance of	ı a	INIODIIILY DOG	11	icase uc	'v uic	DOVES	ulat	. DESL	Juit	youi .	situat		

Me Paid Support/Carer

Family/Friends

The dog will be fed by

The dog will be groomed by

The dog will be exercised by

The dog waste will be picked up by

# **Pre-Application Agreement**

In order for your application to be valid please read and confirm your understanding of the below by checking the boxes, and sign and date the application below. I acknowledge that my typed name has the same legal effect as a handwritten signature. \*

I understand all the information in the Mobility Dog pre-application form, including that there are a number of components and criteria that have to be met before my application can progress further.

### **Applicant Full Name**

## Date \*

Day Month Year

### **Tags**

Todo

In Progress

Done