**Booking Form**

**Lead Reviewer Training**

**Remote Review via MS Teams**

**Friday 12th August 2022**

**13:30-15:30**

|  |  |
| --- | --- |
| **Name** |  |
| **Role** |  |
| **Ward** |  |
| **Trust/ organisation** |  |
| **Email address** |  |
| **Phone number** |  |
| **Please indicate whether you have a medical, nursing or MDT background** |  |
| **How many years’ experience do you have of working within rehabilitation’ services?** |  |

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| --- |
| **Please also let us know if you are available to support any of the upcoming reviews, following attendance of training:**  |
| **Clearbrook**  | **25/08/2022** |
| **Roseacre Ward** | **28/09/2022** |
| **Tuke Highfield Healthcare** | **29/09/2022** |
| **Kenton** | **26/10/2022** |
|  |  |
|  |  |

**Please return completed forms to**

**rehab@rcpsych.ac.uk**

**Note - this event is only available to professionals working within a service which is currently a member of Rehab.**