

Appendix 2

Patient Contract

Gym Groups

Name			
Hailie			

By signing this form you are agreeing to abide by the following ground rules:-

- I agree to follow the gym programme as prescribed by the Exercise Therapist.
- I understand that misuse of the gym equipment is unsafe and not permitted.
- Any persistent misuse will result in me being asked to leave the gym.
- I agree to follow the advice and guidance given from the gym staff.
- I understand swearing and threatening behaviour of any nature is not permitted.
- It is my responsibility to attend the gym on the agreed days.
- I understand that non attendance may result in discharge from the gym.
- I understand that if I am suffering from any medical conditions it is my
 responsibility to bring appropriate medication to each session eg inhalers,
 GTN spray, insulin. Failure to do so will result in the session being withdrawn
 for that day.
- I understand that exercising under the influence of alcohol or illicit substances is dangerous and not permitted.

Community Exercise Groups

I Agree:

- To follow the advice and guidance of the Exercise Therapy Staff.
- To wear appropriate clothing and footwear.
- To bring a drink and a waterproof (where necessary).
- To bring relevant medication (where necessary).
- To attend 10 minutes before the start of the group.

- To inform the Exercise Therapy department if I am unable to attend.
- To inform the Exercise Therapist of any recent illness or injury.
- Arrange my own transport to and from the group venue. (Transport will be provided for in-patients).
- Smoking is not permitted during any of the groups.
- Swearing, threatening and inappropriate behaviour is not permitted and may result in discharge from the group.
- If an incident occurs where possible the group should stay together.
- Clients attending the walking group and cycling group are expected to complete each session once they have started. If you choose to leave the group, facilitators are no longer responsible for you. Clients who arrive late will not be able to join the group. It is your responsibility to ring/inform the Exercise Therapy Department 1 hour before the group starts to confirm attendance.
- If you do not attend for 2 weeks or more you may lose your place in the group and go onto the waiting list.

I agree to abide by the ground rules and agree to attendtimes/week

Exercise Goals								
Client Signature		Date						
Staff Signature		Date						