



Health and Care Passport

Name:



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My Details

This Health and Care Passport should be completed by you and the people that know you best. By filling it in, you are giving permission for your information to be shared with health and care staff who are caring for you. This is called consent.

Tick yes if you agree to this.

To those people providing care to me: This health care passport has information about me, to help you support and care for me. You can get more information about my medical records through the Health Information Exchange on the Great North Care Record.

	My name is
Name	I like to be called
	My pronouns are: he/his she/her they/them
NHS June 1972	NHS number
	Date of birth
Your Street	Address
#123 HIST 13 61 61 13 61 61	Mobile number
123 4567 (1	Landline number

Communication

How well do I know and understand speech...



What languages I speak...



Communication aids or tools I use...



The best way to give me information is: e.g. easy read, with carer etc.



Home Environment

	Where I live: Live independently Supported living Shared house Live with family Live with 24 hour support
Support Plan Plan 11 12 1 9 X 3 8 - 4 7 6 5	Daily / weekly hours of support I have support: Every day of the week 1 day a week 2 days a week 3 days a week 4 day a week 5 days a week I don't have support 6 days a week I don't know
	How many hours support a week do I have Who do I normally live with

5.5%	I need help to dress What help do I normally need
	I need help to wash What help do I normally need
	I need help to brush my teeth What help do I normally need

I need help to toilet What help do I normally need
I use continence aids What I use
Normally I poo at least once a day at least once every 2 days at least once every 3 days at least once a week unsure

	I need help choosing my food and drink What help do I normally need
	I need help to eat What help do I normally need
<i>III</i>	My food should be:
1	Cut up Pureed
	I need help to drink What help do I normally need
	My drink should be:
	Given in small amounts Given using a specific type of cup Thickened

I need help with my posture when sitting / lying What help do I normally need
I need help to get about What help do I normally need



Supporting pain or distress in Hospital

How do you know I am in pain...



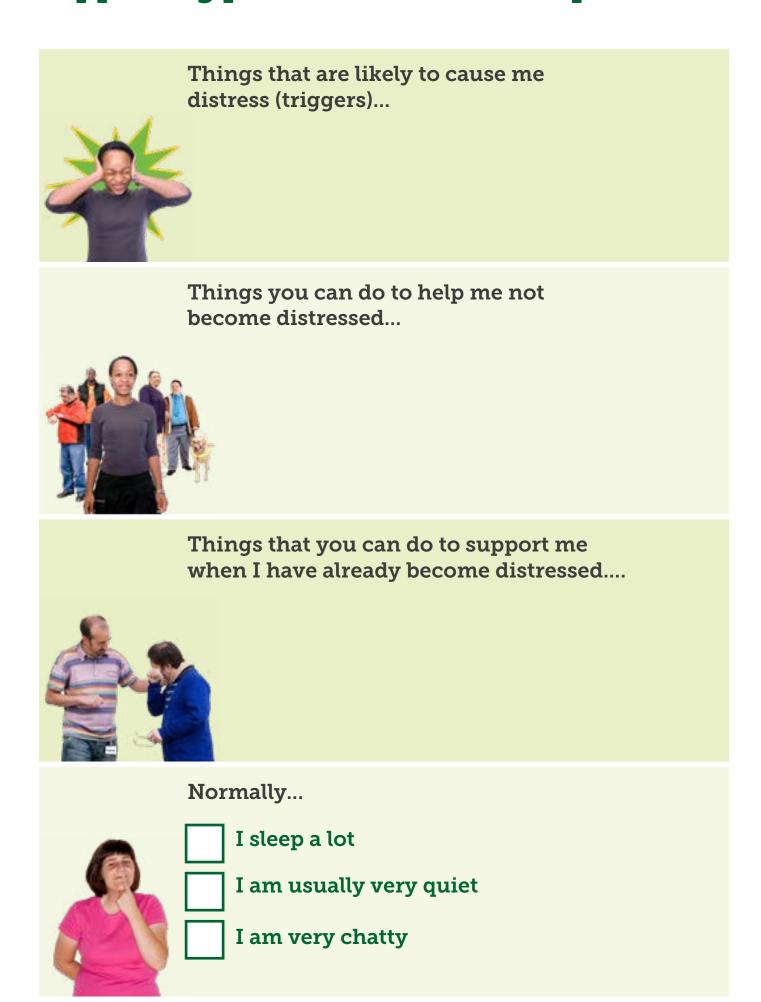
How to support me if I'm in pain...



Different ways I communicate when I am distressed...



Supporting pain or distress in Hospital



Support in Hospital



Sight and Hearing

_	Seeing (problems with sight):
	I have problems with my sight
9	I wear glasses
	I have poor sight
	I am partially sighted or registered blind
	More information on my sight
	Hearing (problems with hearing):
()	I have problems with my hearing
	I wear a hearing aid
	I lip read
	More information about my hearing

Food and Drink

Keeping Safe



How I keep safe... e.g. bed rails, support with challenging behaviour, do I wander, do I fall



Sleeping, my normal sleep patterns and routine are...



Things I like, please do this...



Things I don't like, please don't do this...



Keeping Safe

	3 things that will make my stay in hospital better
Hospital	Is there any other information we should know whilst you are in hospital
Passport? T	and help to complete this Health and Care lick yes or no. has helped you?